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KIMSEY, HERMAN E. 61555 D

SECRET

Form Filled In

| REQUEST FOR PERSONNEL ACTION | | | | DATE PREPARED
10 July 1962 | | | | | | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------|-------------------------------------------------------|-------------------------------------|-------------------------------------------------------|------|----------|------|----------|------|----------|----------|--|--|--|--|--|
| 1. SERIAL NUMBER
61555 | | 2. NAME (Last-First-Middle)
KIMSEY, HERMAN E. | | | | | | | | | | | | | | | |
| 3. NATURE OF PERSONNEL ACTION
TERMINATION | | | 4. EFFECTIVE DATE REQUESTED
MONTH 7 DAY 20 YEAR 62 | | 5. CATEGORY OF EMPLOYMENT
REGULAR | | | | | | | | | | | | |
| 6. FUNDS
X V TO V
CF TO V | | | 7. LOST CENTER NO. CHARGE
3225-1050-1004 | | 8. LEGAL AUTHORITY (Completed by Office of Personnel) | | | | | | | | | | | | |
| 9. ORGANIZATIONAL DESIGNATIONS
DDP/TSD
Authentication
Graphic Arts Reproduction Branch
Analysis and Research Section | | | 10. LOCATION OF OFFICIAL STATION
Washington, D. C. | | | | | | | | | | | | | | |
| 11. POSITION TITLE
DOCUMENT TECH CH | | | 12. POSITION NUMBER
0652 | 13. CAREER SERVICE DESIGNATION
D | | | | | | | | | | | | | |
| 14. CLASSIFICATION SCHEDULE (GS, LP, etc.)
GS | | 15. OCCUPATIONAL SERIES
1397.01 | 16. GRADE AND STEP
13 (4) | 17. SALARY OR RATE
11415 | | | | | | | | | | | | | |
| 18. REMARKS
Continuous Agency service from 20 March 1953 to 20 September 1962. | | | | | | | | | | | | | | | | | |
| <p>Form 1155 Remarks: Terminated in accordance with provisions of CIA Regulation 20-27, Separation of Surplus Personnel, pursuant to authority of Director of Central Intelligence contained in Section 102 (c) of the National Security Act of 1947, as amended. This termination does not affect your right to seek or accept employment in any other department or agency of the U. S. Government if you are declared eligible for such employment by the U. S. Civil Service Commission.</p> <p>Authorized Maximum Separation Compensation in accordance with the provisions of CIA Regulation 20-32, Separation Compensation.</p> | | | | | | | | | | | | | | | | | |
| 19. SIGNATURE OF REQUESTING OFFICIAL | | DATE SIGNED | | 20. APPROVING OFFICIAL
SD/CMC | | | | | | | | | | | | | |
| <p>21. SPACE BELOW FOR EXCLUSIVE USE OF PERSONNEL</p> <table border="1"> <thead> <tr> <th>DATE</th> <th>INITIALS</th> <th>DATE</th> <th>INITIALS</th> <th>DATE</th> <th>INITIALS</th> </tr> </thead> <tbody> <tr> <td>10/11/62</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>22. DATE OF BIRTH</p> <p>23. DATE OF DEATH</p> <p>24. DATE OF DEATH</p> <p>25. DATE OF DEATH</p> <p>26. DATE OF DEATH</p> <p>27. DATE OF DEATH</p> <p>28. DATE OF DEATH</p> <p>29. DATE OF DEATH</p> <p>30. DATE OF DEATH</p> <p>31. DATE OF DEATH</p> <p>32. DATE OF DEATH</p> <p>33. DATE OF DEATH</p> <p>34. DATE OF DEATH</p> <p>35. DATE OF DEATH</p> <p>36. DATE OF DEATH</p> <p>37. DATE OF DEATH</p> <p>38. DATE OF DEATH</p> <p>39. DATE OF DEATH</p> <p>40. DATE OF DEATH</p> <p>41. DATE OF DEATH</p> <p>42. DATE OF DEATH</p> <p>43. DATE OF DEATH</p> <p>44. DATE OF DEATH</p> <p>45. DATE OF DEATH</p> <p>46. DATE OF DEATH</p> <p>47. DATE OF DEATH</p> <p>48. DATE OF DEATH</p> <p>49. DATE OF DEATH</p> <p>50. DATE OF DEATH</p> <p>51. DATE OF DEATH</p> <p>52. DATE OF DEATH</p> <p>53. DATE OF DEATH</p> <p>54. DATE OF DEATH</p> <p>55. DATE OF DEATH</p> <p>56. DATE OF DEATH</p> <p>57. DATE OF DEATH</p> <p>58. DATE OF DEATH</p> <p>59. DATE OF DEATH</p> <p>60. DATE OF DEATH</p> <p>61. DATE OF DEATH</p> <p>62. DATE OF DEATH</p> <p>63. DATE OF DEATH</p> <p>64. DATE OF DEATH</p> <p>65. DATE OF DEATH</p> <p>66. DATE OF DEATH</p> <p>67. DATE OF DEATH</p> <p>68. DATE OF DEATH</p> <p>69. DATE OF DEATH</p> <p>70. DATE OF DEATH</p> <p>71. DATE OF DEATH</p> <p>72. DATE OF DEATH</p> <p>73. DATE OF DEATH</p> <p>74. DATE OF DEATH</p> <p>75. DATE OF DEATH</p> <p>76. DATE OF DEATH</p> <p>77. DATE OF DEATH</p> <p>78. DATE OF DEATH</p> <p>79. DATE OF DEATH</p> <p>80. DATE OF DEATH</p> <p>81. DATE OF DEATH</p> <p>82. DATE OF DEATH</p> <p>83. DATE OF DEATH</p> <p>84. DATE OF DEATH</p> <p>85. DATE OF DEATH</p> <p>86. DATE OF DEATH</p> <p>87. DATE OF DEATH</p> <p>88. DATE OF DEATH</p> <p>89. DATE OF DEATH</p> <p>90. DATE OF DEATH</p> <p>91. DATE OF DEATH</p> <p>92. DATE OF DEATH</p> <p>93. DATE OF DEATH</p> <p>94. DATE OF DEATH</p> <p>95. DATE OF DEATH</p> <p>96. DATE OF DEATH</p> <p>97. DATE OF DEATH</p> <p>98. DATE OF DEATH</p> <p>99. DATE OF DEATH</p> <p>100. DATE OF DEATH</p> | | | | | | DATE | INITIALS | DATE | INITIALS | DATE | INITIALS | 10/11/62 | | | | | |
| DATE | INITIALS | DATE | INITIALS | DATE | INITIALS | | | | | | | | | | | | |
| 10/11/62 | | | | | | | | | | | | | | | | | |

SECRET

101

SECRET
(When Filled In)

| | | | | | | | | | | | | | | | | | |
|---------------|----|----|------------------------------|--|---------------------------------|--|--|----------------------|--|--|-------------------|--|-----------|--|----------------------------|--|--|
| DATE PREPARED | | | REQUEST FOR PERSONNEL ACTION | | | | | | | | | | X V to V | | V to UV | | |
| Mo | Da | Yr | | | | | | | | | | | UV to V | | UV to UV | | |
| 05 | 09 | 60 | | | | | | | | | | | | | | | |
| 1. Serial No. | | | 2. Name (Last-First-Middle) | | | | | 3. Date of Birth | | | 4. Vol. Pref. | | 5. Sex | | 6. CS - LOD | | |
| | | | KIMSEY, Herman E. | | | | | Mo Da Yr
12 11 16 | | | None-0
10 Pr-2 | | Code
M | | Mo Da Yr | | |
| 7. SED | | | 8. CSC Perm. | | 9. CSC Or Other Legal Authority | | | 10. Appt. Affidav. | | | 11. FEGLI | | 12. LEO | | 13. MIL. SERV. CREDIT, LEO | | |
| Mo | Da | Yr | Yes - 1
No - 2 | | Code | | | Mo Da Yr | | | Yes-1
No-2 | | Mo Da Yr | | Yes - 1
No - 2 | | |

PREVIOUS ASSIGNMENT

| | | | | | | | | | | | |
|--------------------------------------------------------------------------------------------|-----------|--------------------|--|------------------|--|----------------------------------|--|----------------------|--|--------------------------|--|
| 14. Organizational Designations | | | | Code | | 15. Location Of Official Station | | | | Station Code | |
| DDP/TSS
Authentication
Graphic Arts Reproduction Div
Analysis and Research Branch | | | | | | Washington, D.C. | | | | | |
| 16. Dept. Field | | 17. Position Title | | 18. Position No. | | 19. Serv. | | 20. Occup. Series | | | |
| Dept. - X
Valid -
Frgn - | Code
2 | IO TECH AIDS | | 92 | | GS | | 0136, 63 | | | |
| 21. Grade & Step | | 22. Salary Or Rate | | 23. SD | | 24. Date Of Grade | | 25. PSI Due | | 26. Appropriation Number | |
| 13 3 | | 10, 370 | | D | | Mo Da Yr
02-10-57 | | Mo Da Yr
08-10-61 | | 0225-1005-1000 | |

ACTION

| | | | | | | | | | | | |
|----------------------|--|------|--|----------------------|--|----------------------|--|------|--|---------------------|--|
| 27. Nature Of Action | | Code | | 28. Eff. Date | | 29. Type Of Employee | | Code | | 30. Separation Data | |
| REASSIGNMENT | | 12 | | Mo Da Yr
02-10-57 | | REGULAR | | | | | |

6

PRESENT ASSIGNMENT

| | | | | | | | | | | | |
|------------------------------------------------------------------------------------------------|-----------|--------------------|--|------------------|--|----------------------------------|--|----------------------|--|--------------------------|--|
| 31. Organizational Designations | | | | Code | | 32. Location Of Official Station | | | | Station Code | |
| DDP/TSD
Authentication
Graphic Arts Reproduction Branch
Analysis and Research Section | | | | | | | | | | | |
| 33. Dept. Field | | 34. Position Title | | 35. Position No. | | 36. Serv. | | 37. Occup. Series | | | |
| Dept. -
Valid -
Frgn - | Code
2 | DOCUMENT TECH-CH | | 658 | | GS | | 1397. 01 | | | |
| 38. Grade & Step | | 39. Salary Or Rate | | 40. SD | | 41. Date Of Grade | | 42. PSI Due | | 43. Appropriation Number | |
| | | | | | | Mo Da Yr
02-10-57 | | Mo Da Yr
08-10-61 | | | |
| SOURCE OF REQUEST | | | | | | | | | | | |
| A. Requested By (Name And Title) | | | | | | C. Requested By | | | | | |
| B. For Additional Information Call (Name & Telephone Ext.) | | | | | | D. Requested By | | | | | |
| Emanuele Fontana ext. 3031 | | | | | | Career Management Officer, TSD | | | | | |
| CLEARANCES | | | | | | | | | | | |
| Clearance | | Signature | | Date | | Clearance | | Signature | | Date | |
| A. Career Board | | [Signature] | | [Date] | | B. Placement | | [Signature] | | [Date] | |
| C. Fee Control | | [Signature] | | [Date] | | D. Approved By | | [Signature] | | [Date] | |
| E. Classification | | [Signature] | | [Date] | | F. Approved By | | [Signature] | | [Date] | |
| Remarks | | | | | | | | | | | |

1152a (Use Previous Ed.)

SECRET

101

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| REQUEST FOR PERSONNEL ACTION | | PLATE VOUCHER-10 | |
| REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse. | | | |
| 1. NAME (Mr - Miss - Mrs - One given name, initials, and surname)
AIR. HERMAN E. KIMSEY | | 2. DATE OF BIRTH
11 Dec 1916 | 3. REQUEST BY

 |
| 4. NATURE OF ACTION REQUESTED
A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)
PROMOTION | | 5. EFFECTIVE DATE
A. PROPOSED

 | 6. DATE OF REQUEST
24 Jan 57 |
| 7. POSITION (Specify whether establish, change grade or title, etc.)

 | | 8. APPROVED

 | |
| FROM
TO TECH AIDS BY 92
GS-0136.63-12 \$7785 per annum
DDP/TSS
Authentication
Graphic Arts Reproduction Division
Analysis and Research Branch
Washington, D.C. | | 9. POSITION TITLE AND NUMBER

 | 10. SERVICE, GRADE AND SALARY

 |
| 11. ORGANIZATION DESIGNATIONS

 | | 12. HEADQUARTERS

 | 13. FIELD OR DEPARTMENTAL
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL |
| TO
IO TECH AIDS BY 92
GS-0136.63-13 \$8790 per annum
DDP/TSS
Authentication
Graphic Arts Reproduction Division
Analysis and Research Branch
Washington, D.C. | | 14. FIELD OR DEPARTMENTAL
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL | 15. REMARKS (Use reverse if necessary) |
| 16. REQUESTED BY (Name and title)

 | | 17. REQUEST APPROVED BY

 | |
| 18. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)

 | | 19. SIGNATURE

 | |
| 20. VETERAN PREFERENCE
NONE <input type="checkbox"/> 5 YEAR <input type="checkbox"/> 10 YEAR <input type="checkbox"/> 15 YEAR <input type="checkbox"/> 20 YEAR <input type="checkbox"/> 25 YEAR <input type="checkbox"/> 30 YEAR <input type="checkbox"/> 35 YEAR <input type="checkbox"/> 40 YEAR <input type="checkbox"/> 45 YEAR <input type="checkbox"/> 50 YEAR <input type="checkbox"/> 55 YEAR <input type="checkbox"/> 60 YEAR <input type="checkbox"/> 65 YEAR <input type="checkbox"/> 70 YEAR <input type="checkbox"/> 75 YEAR <input type="checkbox"/> 80 YEAR <input type="checkbox"/> 85 YEAR <input type="checkbox"/> 90 YEAR <input type="checkbox"/> 95 YEAR <input type="checkbox"/> 100 YEAR <input type="checkbox"/> | | 21. PAYMENT CLASSIFICATION ACTION
YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| 22. APPROPRIATION
FROM 7-2505-20
TO 7-2505-20 | | 23. DATE OF APPOINTMENT
24. DATE OF RESIGNATION
25. DATE OF SEPARATION
26. DATE OF REENTRY
27. DATE OF REENTRY
28. DATE OF REENTRY
29. DATE OF REENTRY
30. DATE OF REENTRY | |
| 31. STANDARD FORM 63 REMARKS

 | | 32. LEGAL RESIDENCE
<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
STATE CALIF. | |
| 33. CLEARANCE
A.
B.
C.
D.
E.
F.
G.
H.
I.
J.
K.
L.
M.
N.
O.
P.
Q.
R.
S.
T.
U.
V.
W.
X.
Y.
Z. | | 34. INITIALS OF SIGNATURE

 | |
| 35. DATE

 | | 36. SIGNATURE

 | |
| 37. DATE

 | | 38. SIGNATURE

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| 39. DATE

 | | 40. SIGNATURE

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| 41. DATE

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| 43. DATE

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| 95. DATE

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| 97. DATE

 | | 98. SIGNATURE

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| 99. DATE

 | | 100. SIGNATURE

 | |

SECRET

7-2505-20 25 Jan 57

The following applications must be filed named after when an employee (1) enters on duty; changes name, home or office address; transfers to another component of the agency; or (4) is to be absent from office for more than 10 days in which case enter the office telephone number of the administrative officer; (5) changes marital status.

STATE TYPE OF CHANGE

NAME: Kinsey, Herman Edward DATE: 6 April 1958

OFFICE DESIGNATION & LOCATION: AIR G-50 TOS Central 2C 8792

NEW ADDRESS:

PRESENT ADDRESS: 1723 "G" St. NW.

HOME TELEPHONE NO.: National 8-2786 MARITAL STATUS: Single

IS THIS INDIVIDUAL'S NAME TO BE INCLUDED IN THE TELEPHONE DIRECTORY? YES ☐ NO ☒

REMARKS: Return 107 - I

| SERIAL NO. | NAME | ORGANIZATION | OFFICE | OFFICE TELEPHONE NUMBER | HOME PHONE EXCHANGE | HOME PHONE NUMBER | DATE |
|------------|------|--------------|--------|-------------------------|---------------------|-------------------|------|
| | | | | | | | |

SECRET
(When Filled In)

PERSONNEL DATA SHEET

NAME: MR. HERMAN E. KIMSEY AGE 40 years BIRTH 24 January 1917
 POSITION: Washington, D.C.
 ASSIGNMENT: IO TECH AIDS DOW UNIT TSS PRIMARY CAREER DESIGNATION DT

PRESENT GRADE GS-12 PROPOSED TO SLOT
 PROPOSED GRADE GS-13 NUMBER & GRADE BY 92
 C & TRAINING
 PROPOSED TO SLOP
 NUMBER & GRADE BY 92 GS-13

EDUCATION:
 Two years coll. - No degree

LANGUAGE:
 Japanese - slight

EXPERIENCE PRIOR TO GSA (Excluding SSU OWs):
 1941-'43-Military Service
 '44-'45-McCloud River Lbr. Co., Brakeman, \$1.10 p/h.
 '44-'48-U. S. Forest Service, Camp Administrator
 '48-'51-Military Service

COMBINED BY GSA WITH OUR ASSIGNMENTS INCLUDING PREVIOUS
 GRADES AND DATES:

Appt. - 23 Mar 1953-Tech Projects Off, GS-9
 Reassign-13 Sept 1953, Technologist, TSS/GARD, GS-9
 Promot-9 May 1954-Technologist, TSS/GARD, GS-11
 Reass-27 Feb 1955-IO Tech Aids, TSS/GARD, GS-11
 Promot-19 Jun 1955-IO Tech Aids, TSS/GARD, GS-12

RECOMMENDATION BY:
 JOSEPH F. MARZEN
 Acting Chief, TSS/GARD

RECOMMENDATION BY:
 CHARLES J. RYAN
 AC/TSS/AUTH

SEE ATTACHED MEMORANDUM

G-3467
10 January 1956

MEMORANDUM FOR : Chief, TSS Administrative Staff
SUBJECT : Request for Promotion - Herman E. Kimsey

1. It is requested that Herman E. Kimsey be promoted from GS-12 to GS-13. Mr. Kimsey has been in grade for over 18 months. Mr. Kimsey has been Chief of the A&R Section of GARD for over 22 months. During this time he has exhibited ability in conducting and managing the activities of his branch. Mr. Kimsey is a Questioned Documents Analyst and is well-fitted to perform the duties required of the A&R Branch.

2. It is recommended that Mr. Kimsey be promoted to GS-13.

Joseph F. Marzen
JOSEPH F. MARZEN
Acting Chief, TSS/GARD

Distribution:

- 1 - Addressee
- 1 - TSS/SRB
- 1 - TSS/GARD/file
- 1 - TSS/GARD/Chrono

Concur -



SECRET
(When filled in)

DD/P
PERSONNEL DATA SHEET

NAME: KIMSEY, Herman F.

AGE: 39 years

DATE: 27 May 1955

STATION Washington, D.C.
AND DUTIES: 10 Tech Aids

DD/P UNIT:

TSG

PRIMARY CAREER

DESIGNATION: DT

PRESENT GRADE: GS-11
PROPOSED GRADE: GS-12
CIA TRAINING:

PRESENT T/O SLOT
NUMBER AND GRADE: FY 92
GS-11

PROPOSED T/O SLOT
NUMBER AND GRADE: FY 92
GS-12

EDUCATION: Two years college - no degree

LANGUAGE PROFICIENCY:

Japanese - slight

ASSESSED:

DATE:

TYPE OF POSITION:

RESULTS:

EXPERIENCE PRIOR TO CIA (excluding SSU-OSS):

- '51 - '43 - Military Service
- '44 - '45 - Mc Cloud River Lbr. Co., Brakeman, \$1.10 p/h
- '46 - '48 - U.S. Forest Service, Camp Administrator
- '48 - '51 - Military Service

SUMMARY OF CIA-SSU-OSS ASSIGNMENTS INCLUDING PREVIOUS GRADES AND DATES:

- Appt 23 Mar 1953, Tech Projects Off. GS-9
- Reassignment 13 Sept 1953, Technologist, GARD GS-9
- Promotion 9 May 1954 - Technologist, GARD GS-11
- Reassign 27 Feb 55 - 10 Tech Aids, GARD, GS-11

RECOMMENDED BY:


CHARLES YACH, JR.
Chief, TSG/GARD

CONCURRENCES:

RECOMMENDATION OF CAREER SERVICE BOARD: Mr. Kimsey has been Acting Chief of the Analysis and Research Branch of GARD for over 12 months and during this time has exhibited ability in conducting and directing the activities of this Branch. Mr. Kimsey is a professional document analyst and is very well fitted to perform the duties assigned of the Analysis and Research Branch, both in its connections as Quality Control for GARD document production and as handwriting Typewriter and Falsification Analyst. Request that in view of the foregoing, Mr. Kimsey be promoted to GS-12.

SECRET

SECRET

| STANDARD FORM 62
PERSONNEL ACTION
REQUEST FOR PERSONNEL ACTION | | VOUCHER | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse. | | | |
| 1. NAME (Mr., Mrs., Miss, etc. One given name, initial(s), and surname)
MR. HERMAN E. KINSEY | | 2. DATE OF BIRTH
11 Dec 1916 | 3. REQUEST NO.
19 JUN 1955 |
| 4. NATURE OF ACTION REQUESTED:
A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)
PROMOTION | | 5. EFFECTIVE DATE
A. PROPOSED:
27 May 55 | 6. DATE OF REVIEW
B. ACT OR OTHER
LEGAL AUTHORITY
117 |
| 7. POSITION (Specify whether establish, change grade or title, etc.) | | 8. APPROVED:
19 JUN 1955 | |
| FROM: IO TECH AIDS BY 92-11
GS-0136.03-11 \$5940 per annum
DDP/Technical Services Staff
Authentication
Graphic Arts Reproduction Division
Analysis and Research Branch
Washington, D.C. | | TO: IO TECH AIDS BY 92
GS-0136.03-12 \$7040 per annum
DDP/Technical Services Staff
Authentication
Graphic Arts Reproduction Division
Analysis and Research Branch
Washington, D.C. | |
| 9. HEADQUARTERS
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL | | 10. FIELD OR DEPARTMENTAL
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL | |
| 11. REMARKS (Use reverse if necessary) | | | |
| B. REQUESTED BY (Name and title)
Tom Clines x 3031 | | D. REQUEST APPROVED
Signature: 
Title: Correspondence Management Officer, TSS | |
| C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)
Tom Clines x 3031 | | E. POSITION CLASSIFICATION ACTION
SD-UT | |
| 12. VETERAN PREFERENCE
NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> 10 POINT
DISAB. OTHER <input type="checkbox"/> | | 13. POSITION CLASSIFICATION ACTION
NEW <input type="checkbox"/> VICE <input type="checkbox"/> I.A. <input type="checkbox"/> REAL <input type="checkbox"/> | |
| 14. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F
15. RACE <input checked="" type="checkbox"/> W <input type="checkbox"/> N
16. APPROPRIATION
FROM: 5-2515-20
TO: same | | 17. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)
Yes | |
| 18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) | | 19. LEGAL RESERVE
<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
STATE: | |
| 20. STANDARD FORM 50 REMARKS | | | |
| 21. CLEARANCE | | | |
| A. INITIAL OR SIGNATURE | | DATE | |
| B. CEIL. OR POS. CONTROL | | REMARKS: | |
| C. CLASSIFICATION | | 6-7-55 | |
| D. PLACEMENT OR ENPL | | 6-8-55 | |
| E. | | | |
| F. A | | | |

STANDARD FORM 52
PERSONNEL ACTION
REQUEST FOR PERSONNEL ACTION

SECRET

VOUCHERED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)
MR. HERMAN E. KIMSEY

2. DATE OF BIRTH
11 Dec. 1916

3. REQUEST NO.

4. DATE OF REQUEST

16 Feb. 55

5. METHOD OF ACTION REQUESTED
A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)

6. EFFECTIVE DATE
A. PROPOSED:

7. C. S. OR OTHER
LEGAL AUTHORITY

REASSIGNMENT

U. APPROVED

8. POSITION (Specify whether establish, change grade or title, etc.)

FROM— TECHNOLOGIST BY 93

9. POSITION TITLE AND
NUMBER

TO— I.O. (TECH AIDS) BY 92-11

GS-1390.01-11 \$5940 per annum

10. SERVICE, GRADE, AND
SALARY

GS-0136.63-11 \$5940 per annum

~~DGP/Technical Services Staff~~
~~Graphic Arts Reproduction Division~~
~~Analysis and Research Branch~~
~~Washington, D.C.~~

11. ORGANIZATIONAL
DESIGNATIONS

DGP/Technical Services Staff
Graphic Arts Reproduction Division
Analysis and Research Branch
Washington, D.C.

12. HEADQUARTERS

13. FIELD OR DEPARTMENTAL

☐ FIELD

☒ DEPARTMENTAL

14. REMARKS (Use reverse if necessary)

APPROVED BY TSS CAREER SERVICE PANEL

15. REQUESTED BY (Name and title)

16. REQUEST APPROVED BY

17. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)

Signature

Tom Mlines x 3021

Title: Career Management Officer, TSS

18. TELETYPE INDICATOR

19. POSITION CLASSIFICATION ACTION

20. ACTION
FROM 5-2515-20
TO same

21. ACTION
FROM 5-2515-20
TO same

SD-76 DT

22. APPROPRIATION
FROM 5-2515-20
TO same

23. SERVICE TO C. S.
RELIABILITY ACT
(C. S. NO.)
160

24. DATE OF APPOINTMENT
WENT ATTENDANCE
(ACQUISITION ONLY)

25. LEGAL RESIDENCE
☐ CLAIMED ☐ PROVED
STATE:

26. STANDARD FORM OR REMARKS

27. CLEARANCES

INITIAL OR SIGNATURE

DATE

REMARKS

A

B. CLE. OR PYS. CONTROL

C. CLASSIFICATION

D. PAYMENT OR EMP.

F. APPROV.

SECRET

2-27-55

16-5712-1

STANDARD FORM 52
FEDERAL BUREAU OF INVESTIGATION
U. S. DEPARTMENT OF JUSTICE
WASHINGTON, D. C. 20535

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

| | | | | |
|----------------------------------------------------------------------------------------------------------|--|-----------------------------------|----------------|-------------------------------------|
| 1. NAME (Mr., Miss, Mrs. One given name, initials, and surname) | | 2. DATE OF BIRTH | 3. PROJECT NO. | 4. DATE OF REQUEST |
| MR. JEREMIAH E. KEMSEY | | 11 December 1916 | | 22 April 1954 |
| 5. NATURE OF ACTION REQUESTED:
A. PERSONAL (Specify whether appointment, promotion, separation, etc.) | | 6. EFFECTIVE DATE
A. PROPOSED: | | 7. U.S. OR OTHER
LEGAL AUTHORITY |
| PROMOTION | | | | |
| 8. POSITION (Specify whether establish, change grade or title, etc.) | | 9. APPROVED | | |
| | | 9 MAY 1954 | | |

| | | | | |
|--------------------------------|--------------------------------------------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|
| FROM— | TECHNOLOGIST BY 93-9 | 8. POSITION TITLE AND NUMBER | TO— | TECHNOLOGIST BY 93 |
| GS-1390.01-9 | \$5185 | 9. SERVICE, GRADE, AND SALARY | GS-1390.01-11 | \$5540 |
| | | 12. ORGANIZATIONAL DESIGNATIONS | DWP/Technical Services Staff
Graphic Arts Reproduction Div
<i>Design & Research</i>
<i>Labeling & Marking</i> Branch | |
| | | 11. HEADQUARTERS | Washington D. C. | |
| <input type="checkbox"/> FIELD | <input checked="" type="checkbox"/> DEPARTMENTAL | 12. FIELD OR DEPARTMENTAL | <input type="checkbox"/> FIELD | <input checked="" type="checkbox"/> DEPARTMENTAL |
| A. REMARKS (100) | | | | |

A. REMARKS (Use reverse if necessary)

PERIODIC STATE ... 23/12/37

TO SALARY \$ 5.55

| | | | | | | | |
|-------------------------------------------------------------------|------|-------------|--------------|--------------------------------------------------------|------|------|------|
| B. REQUESTED BY (Name and title) | | | | D. REQUEST APPROVED | | | |
| E. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) | | | | Signature: | | | |
| Tom Collins 8305 | | | | Title: Acting Personnel Officer, TSS | | | |
| 13. VETERAN PREFERENCE | | | | 14. PORTION CLASSIFICATION ACTION | | | |
| NONE | WWII | OTHER: S PT | 10 POINT | NEW | VEIL | I.A. | RLAL |
| | | X | DISAB. OTHER | | | | |
| 15. SEX | | | | 16. RACE | | | |
| M | | | | W | | | |
| 17. APPROPRIATION | | | | 18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) | | | |
| FROM: 4-2515-20 | | | | Yes | | | |
| TO: 4-2515-20 | | | | 19. DATE OF APPOINTMENT AT FLETC (ACCOMMODATIONS ONLY) | | | |
| 20. LEGAL RESIDENCE | | | | 21. STANDARD FORM NO. 100-10 | | | |
| CLAIMED | | | | PROVED | | | |
| STATE: | | | | | | | |

21. STANDARD FORM 50 REMARKS

Approved by The Council of the Board (20)

| | | | |
|-------------------------|----------------------|----------------|----------|
| 22. CLEARANCES | INITIAL OR SIGNATURE | DATE | REMARKS: |
| A. | | | |
| B. CELL OR POS. CONTROL | <i>AE</i> | <i>2/27/51</i> | |
| C. CLASSIFICATION | | | |
| D. PLACEMENT OR EMPL. | <i>fnc</i> | <i>2/27/51</i> | |
| E. | | | |
| F. APPROVED BY | <i>[Signature]</i> | | |

STANDARD FORM 52
PREVIOUS EDITIONS
U.S. GOVERNMENT PRINTING OFFICE
WASHINGTON, D.C. 20540
MAY 1962 EDITION
GSA GEN. REG. NO. 27

REQUEST FOR PERSONNEL ACTION

VOUCHERED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

| | | | |
|--------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------|--------------------|
| 1. NAME (Mr - Miss - Mrs - One given name, initials, and surname) | 2. DATE OF BIRTH | 3. REQUEST NO. | 4. DATE OF REQUEST |
| M. PERMAN E. KINSEY | 11 Dec '16 | | 23 Mar '17 |
| 5. NATURE OF ACTION REQUESTED:
A. REASON (Specify whether appointment, promotion, separation, etc.) | | 6. EFFECTIVE DATE
A. PROPOSED:
APR 1 1917 | |
| REASSIGNMENT | | 7. C.S. OR OTHER
LEGAL AUTHORITY | |
| 8. POSITION (Specify whether establish, change grade or title, etc.) | | D. APPROVED: | |

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FROM—
TECH PROJECTS OF BY 256-9
GS-1390-9 \$5060
DDP/Technical Services Staff
Graphic Arts Reproduction Div
Office of the Chief
Washington D.C. | 9. POSITION TITLE AND NUMBER
10. SERVICE, GRADE, AND SALARY
11. ORGANIZATIONAL DESIGNATIONS
12. HEADQUARTERS
13. FIELD OR DEPARTMENTAL | TO—
TECHNOLOGIST BY 93-9
GS-1390.01-9 \$5060
DDP/Technical Services Staff
Graphic Arts Reproduction Div
Analysis & Research Branch
Washington D.C. |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| | | |
|---------------------------------------|----------------------------------|-------------------------------------------------------------------|
| A. REMARKS (Use reverse if necessary) | B. REQUESTED BY (Name and title) | C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) |
| 38 Dec 22
5185 | | 6305 |

| | | |
|------------------------|-----------|-------------------------------|
| D. REQUEST APPROVED BY | Signature | Title |
| | | Acting Personnel Officer, TSS |

| | | |
|------------------------------------------------|---------------------------------------------|-----------------------------------------------------|
| 14. VETERAN PRECEDENCE | 15. POSITION CLASSIFICATION ACTION | 16. CD-TS |
| NONE
WAR
OTHER
10 POINT
DEAD POINT | NEW
VICE
1 A
REAL | |
| 17. APPROPRIATION | 18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) | 19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) |
| FROM: 4-2515-20
TO: 4-2515-20 | Yes | |
| 20. LEGAL RESIDENCE | 21. STANDARD FORM 50 REMARKS | |
| CLAIMED
PROVED
STATE: | | |

| | | | |
|------------------------|----------------------|----------|---------|
| 22. CLEARANCES | INITIAL OR SIGNATURE | DATE | REMARKS |
| A. | | | |
| B. CELL OR FBI CONTROL | BC | 2 Apr 57 | |
| C. CLASSIFICATION | | 1.4.7 | |
| D. PLACEMENT OF INFO | | | |
| E. | | | |

| | |
|----------------|--------|
| F. APPROVED BY | SECRET |
| | 4/1/57 |

STANDARD FORM 52
PERSONNEL ACTION
1. NAME (Last, first, middle initial, and surname)
2. DATE OF BIRTH
3. REQUEST NO.
4. DATE OF REQUEST

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Last, first, middle initial, and surname)

Mr. Herman E. KINSEY

2. DATE OF BIRTH

11/22/01

3. REQUEST NO.

4. DATE OF REQUEST

21. Aug 53

5. NATURE OF ACTION REQUESTED

A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)

Reassignment

6. EFFECTIVE DATE

A. PROPOSED:

13 Sept 53

B. APPROVED:

13 Sept 53

B. POSITION (Specify whether establish, change grade or title, etc.)

FROM

TECH PROJECTS OFF BY 256-9

GS-1390-9 35000

DWP/Technical Services Staff
Graphic Arts Reproduction Div
Office of the Chief
Washington D. C.

A. POSITION TITLE AND NUMBER

B. SERVICE, GRADE, AND SALARY

10. ORGANIZATIONAL DESIGNATIONS

11. HEADQUARTERS

12. FIELD OR DEPARTMENTAL

TO

Same

11

11

11

11

11

11

12. FIELD

12. DEPARTMENTAL

A. REMARKS (Use reverse if necessary)

Transfer to Vouchered Funds from Unvouchered Funds.

B. REQUESTED BY (Name and title)

C. REQUEST APPROVED BY

Signature:

Title:

Personnel Officer, TSC

13. VETERAN PREFERENCE

14. POSITION CLASSIFICATION ACTION

15. DATE OF APPOINTMENT AFFIDAVIT (ACCESSION ONLY)

16. DATE OF APPOINTMENT AFFIDAVIT (ACCESSION ONLY)

17. CLAIMED ☐ PROVED ☐

18. STANDARD FORM 50 REMARKS

22. CLEARANCES

INITIAL OR SIGNATURE

DATE

REMARKS

A.

B. CIVIL OR MCS CONTROL

C. CLASSIFICATION

D. PLACEMENT OR LEVEL

E.

F. APPROVED BY

AUG 11 1953

SECRET
SECURITY INFORMATION

| ENTRANCE ON DUTY NOTICE | | | 1. DATE |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------|---------------------------|
| 2. TO: Mr. Quaters Eye | | 3. OFFICE (Division, Branch, Etc.)
TSS GS 9 \$3060.00 | |
| 4. THE PERSON NAMED BELOW MEETS THE STANDARDS FOR EMPLOYMENT WITH THIS AGENCY SUBJECT TO THE TYPE OF CLEARANCE SPECIFIED IN ITEM NO. 9. THE SIGNED CLEARANCE FROM IAS FOR ENTRANCE ON DUTY HAS BEEN MADE A PART OF THE PERSONNEL FILE OF THIS INDIVIDUAL. HE/SHE IS REPORTING FOR DUTY THIS DATE. | | | |
| 5. NAME (Last) (First) (Middle)
KIMBLE HERMAN EDWARD | | 6. JOB TITLE AND GRADE
TECH. PROJ. OFFICER GS 9 | |
| 7. EFFECTIVE DATE OF ACTION
23 March 1953 | | 8. <input checked="" type="checkbox"/> E.O.O.
<input type="checkbox"/> REASSIGNMENT
OTHER: | 9. TYPE CLEARANCE
Full |
| 10. Remarks (Include Medical or Other Limitations) | | | |
| <div style="text-align: right; margin-right: 100px;">
 PERSONNEL OFFICE </div> | | | |
| DISTRIBUTION: ORIGINAL AND COPY (WHITE) TO ITEM NO. 3. COPY (PINK) TO PERSONNEL FOLDER | | | |

FORM NO. 37-114
NOV 1952

PREVIOUS EDITIONS

TO BE USED

SECRET

CONFIDENTIAL

REPORT OF INTERVIEW

13 2471

[illegible]

LANGUAGE FACILITY

№ 105 - № 109.

brown - 2; solid; good appearance; clear: nature; valence;
 in fight; seems of average intelligence - certainly
 at "train", Harolda Linsell OK - impression is
 a flagger - somewhat "stolid" - probably do a
 good, dependable job, on a confidential basis.
 is very interested in business; doesn't mind being out
 and about. He liked instruction at Holston,
 a good man to be sent to as a good job on
 a semi work - showing definite with his management
 power. Would have been at work 50-7 last - would
 not for much even tonight. His retail work
 his work: OK volume (in work + confidential); interest in
 business in general; good; Harolda Linsell; Harolda Linsell;
 Harolda Linsell. OK - F -

2nd Aug 36.

| | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------------------|-------------|--------------------------|
| SOURCE | | REPORT OF INTERVIEW ^{Bul} | | CONTROL NUMBER |
| FIELD | <input type="checkbox"/> | 1643-9 1606 | | DATE
11-16-49 |
| CASUAL | <input type="checkbox"/> | | | |
| RECOMMENDED FOR BRANCH | | DEFE | DEFERRED BY | |
| NAME (LAST) | (FIRST) | (MIDDLE) | GRADE | DEPT... OFFICE OR BRANCH |
| Kinney, Norman Edward | | | | |
| SERIAL NUMBER | ORGANIZATION | | | DATE OF BIRTH |
| | | | | 12-11-16 |
| ADDRESS (HOME OR BUSINESS) | Hast | | | TELEPHONE |
| 7th. E. 9. 1736 E. St. | | | | |
| ADDRESS (HOME) | | | | TELEPHONE |
| | | | | |
| CITIZENSHIP (HOW ACQUIRED) | | | | |
| Born in New Mexico | | | | |
| NAME (HUSBAND OR WIFE) | | | | DATE OF BIRTH |
| By Marriage | | | | |
| PLACE OF BIRTH | CITIZENSHIP (HOW ACQUIRED) | | | |
| | | | | |
| EDUCATION (SCHOOLS, DEGREES, DATES, MAJORS, MINORS, AND EXTRA CURRICULAR ACTIVITIES) | | | | |
| | | | | |
| LANGUAGES (DEGREE OF FLUENCY, HOW ACQUIRED) | | | | |
| | | | | |
| FOREIGN EXPERIENCE (EXTENT AND PURPOSES) | | | | |
| | | | | |
| PRINCIPAL CIVILIAN EXPERIENCE (MAIN OCCUPATION, SPECIAL SKILLS, ACCOMPLISHMENTS, ELECTIVE OFFICES) | | | | |
| | | | | |
| MILITARY EXPERIENCE (PRINCIPAL DUTIES, SERVICE RECORDS, IF OFFICER: WARNER OF PERFORMANCE RATINGS; IF ENL: AGCT SCORE, DEGREE OF SKILLS, MOS AND MOS TITLES) | | | | |
| | | | | |

AND DATE MUST NOT SEE THIS PAGE

UNFAVORABLE CIRCUMSTANCES TO A. T. H. T. T. T.

REMARKS: (EXCEPTIONAL PERTINENT INFORMATION)

Interview by [redacted] . I. & L. for interview & testing.
- has been interviewed in the hand -
Good appearance. Neatly dressed - pleasant

May be a good man as a plugging type.
Conscientious worker but doubt very much
that he is a "flood" at any thing! Very
slow spoken.

James P. L. L. He will bring in typed James 57's
CLEARLY FOR CONSIDERATION BY. [redacted] & [redacted]

SERVICE RECORD CHECKED:

FORM NO. 66-1

FORM NO. 27

| FACTORS | RATINGS | | | | | EXPLANATION |
|-----------------------------------------------------------------------------|---------|---|----|---|-----|-------------|
| | SUP | 1 | VS | 3 | UNS | |
| MOTIVATION - ENERGY, EFFORT,
INITIATIVE, INTEREST IN ASSIGNMENT. | | | | | | |
| PRACTICAL INTELLIGENCE - JUDGMENT,
DECISIVENESS, ALERTNESS, PERCEPTION. | | | | | | |
| STABILITY - EMOTIONAL CONTROL AND
MATURITY, ABSENCE OF NERVOUS SYMPTOMS. | | | | | | |
| ABILITY TO WORK WITH OTHERS - TACT,
ABSENCE OF ANNOYING TRAITS. | | | | | | |
| LEADERSHIP - ORGANIZING ABILITY,
ABILITY TO WIN COOPERATION. | | | | | | |
| PHYSICAL ABILITY - AGILITY, ENDURANCE,
PRESENCE, VIGOR, STAM 74. | | | | | | |

66-111111
[Signature]

SECRET

(When Filled In)

| 1. IDENTIFICATION NUMBER | | BIOGRAPHIC PROFILE (PART I) | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------|----------|------------------------------------|------------------|
| 61555 | | 2. NAME (Last-First-Middle) | | 3. SEX | 4. DATE OF BIRTH |
| KIMNEY, Herman Edward | | M | Dec 1915 | 5. LONGEVITY COMP. DATE | |
| 6. MARITAL STATUS (If dependent) | | 7. FEARST OF BIRTH | | 8. US NATURALIZATION DATE(S) | |
| Single | | 0 | | NA | |
| 9. CAREER STATUS | | 10. LAST MED. RPT. DATE | | 11. US NATURALIZATION DATE(S) | |
| Mar 1956 | | Feb 1959 | | O/S TDY | |
| 12. CURRENT RESERVE STATUS | | 13. PROFESSIONAL TEST DATE | | 14. LANGUAGE APTITUDE TEST DATE | |
| None | | None | | None | |
| 15. NON-CIA EMPLOYMENT | | | | | |
| 1935-45 McCloud River Lumber Co, McCloud, California - Lumberman, Brakeman (intermittently) | | | | | |
| 1941-43 Military Service, US Army, Sgt - Intelligence Non-commissioned Officer | | | | | |
| 1939; 1940; 1945-46 Dept of Agriculture, US Forest Service, Calif - Forest Guard; Camp Superintendent | | | | | |
| 1946-49; 1950-53 Military Service, US Army, CIC, M/Sgt - Instructor USA; Special Agent in charge of Document Laboratory, Japan; Special Agent, Combat CIC Team, Korea; Instructor & Chief, Investigative Laboratory, USA. | | | | | |
| 16. NON-CIA EDUCATION | | | | | |
| High school graduate | | | | | |
| Various Military Schools | | | | | |
| 17. FOREIGN LANGUAGE ABILITIES (Language, Proficiency, Date Tested) | | | | | |
| None | | | | | |
| 18. AGENCY SPONSORED TRAINING | | | | | |
| 1955 Non-clerical Basic Typing | | | | | |
| 19. CIA EMPLOYMENT HISTORY SINCE 15 SEPT 1947 (Personal Actions, Military Orders, and Principal Details) | | | | | |
| EFFECTIVE DATE | POSITION TITLE & OCCUPATIONAL CODE | GRADE | SO | ORGANIZATION & ORG. TITLE (If any) | LOCATION |
| Mar 1953 | Tech Proj Off 301 | 9 | | TSS/Graphic Arts Reproduction | Hq |
| Feb 1954 | Technologist 1390.01 | 9 | TS | DDP/TSS/GARD/Ch, Anal&ResBranch | " |
| May 1954 | " 1390.01 | 11 | DT | " " " " " " " " | " |
| Jun 1955 | I.O. (Tech Aids) 0136.63 | 12 | DT | DDP/TSS/Auth/GARD/Ch, Anal&Res | " |
| Feb 1957 | " " 0136.63 | 13 | DT | " " " " " " " " | " |
| May 1960 | Document Tech 1397.01 | 13 | D | " " " " " " " " | " |
| 20. DATE REVIEWED BY: 15 Sep 1961 OP/TSS/GAP/ | | | | | |
| 21. DATE REVIEWED BY: 3 Aug 1959 | | | | | |

FORM 1200 (PART I) USE PREVIOUS EDITIONS.

SECRET

PROFILE

SECRET

When Filled In

| | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------|--|
| FORM NO. 1000 (PART 2) | | BIOGRAPHIC PROFILE (PART 2) | |
| NAME (Last-First-Middle) | | DATE OF BIRTH | |
| NINSEN, Herman Edward | | Dec 1936 | |
| 23. SUMMARY OF EVALUATIVE REPORTS FOR THE PAST TWO YEARS | | | |
| See Attachment | | | |
| 24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE | | | |
| 25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL | | | |
| 26. ADDITIONAL INFORMATION | | | |
| <p>Appreciation 1958 from Chief, NEA for excellent work on Report G-145 performed by TSS personnel. Endorsed by Chief, GMS/TSS.</p> <p>Commendation 1958 from the field, conveyed by the Career Management Officer, TSS for efficiency in rendering support to an operation.</p> | | | |
| 27. DATE REVIEWED | | 28. PROFILE REVIEWED BY | |
| 15 Sep 1961 | | OP/POC/LB/rms | |
| FORM NO. 1000 (PART 2) | | SECRET | |
| | | PROFILE | |

SECRET
(When Filled In)

| FITNESS REPORT | | | | EMPLOYEE SERIAL NUMBER | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------|--|----------------------------------|-----------------|--------------------------|---|------------------------|---|---|---|
| SECTION A GENERAL | | | | 61555 | | | | | | | |
| 1. NAME
(Last) (First) (Middle) | | 2. DATE OF BIRTH | | 3. SEX | 4. GRADE | | | | | | |
| KIMSEY, Herman E. | | 11 Dec 1916 | | M | GS-13 | | | | | | |
| 5. SERVICE DESIGNATION | | 6. OFFICIAL POSITION TITLE | | 7. OFFICE/DIVISION OF ASSIGNMENT | | | | | | | |
| D | | DOCUMENT TECH CH | | DDP/TSD/AUTH/CARB | | | | | | | |
| 8. CARDER STAFF STATUS | | 9. TYPE OF REPORT | | | | | | | | | |
| <input type="checkbox"/> NOT ELIGIBLE
<input checked="" type="checkbox"/> MEMBER
<input type="checkbox"/> DEFERRED
<input type="checkbox"/> INITIATED
<input type="checkbox"/> PENDING
<input type="checkbox"/> DECLINED
<input type="checkbox"/> DENIED
<input checked="" type="checkbox"/> ANNUAL
<input type="checkbox"/> REASSIGNMENT/SUPERVISOR
<input type="checkbox"/> REASSIGNMENT/EMPLOYEE | | | | | | | | | | | |
| 10. DATE REPORT DUE IN G.P. | | 11. REPORTING PERIOD | | | | | | | | | |
| 31 January 1961 | | Jan 1960 thru Dec 1960 | | | | | | | | | |
| SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES | | | | | | | | | | | |
| List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider G.P.'s effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised). | | | | | | | | | | | |
| 1 - Unsatisfactory 2 - Barely adequate 3 - Acceptable 4 - Competent 5 - Excellent 6 - Superior 7 - Outstanding | | | | | | | | | | | |
| SPECIFIC DUTY NO. 1 | | SPECIFIC DUTY NO. 4 | | RATING NO. | | | | | | | |
| Supervises A&R Section personnel | | Oral Briefings | | 5 | | | | | | | |
| SPECIFIC DUTY NO. 2 | | SPECIFIC DUTY NO. 5 | | RATING NO. | | | | | | | |
| Questioned Document Analysis | | Monitoring the writing of and writing technical reports | | 5 | | | | | | | |
| SPECIFIC DUTY NO. 3 | | SPECIFIC DUTY NO. 6 | | RATING NO. | | | | | | | |
| Liaison with other Government Questioned Document Labs. | | Monitors Graphology Program | | 5 | | | | | | | |
| SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION | | | | | | | | | | | |
| Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance. | | | | | | | | | | | |
| 1 - Performance in many important respects fails to meet requirements.
2 - Performance meets most requirements but is deficient in one or more important respects.
3 - Performance scarcely meets basic requirements.
4 - Performance scarcely exceeds basic requirements.
5 - Performance in every important respect is superior.
6 - Performance in every respect is outstanding. | | | | | RATING NO.
4 | | | | | | |
| SECTION D DESCRIPTION OF THE EMPLOYEE | | | | | | | | | | | |
| In the rating boxes below, check (X) the degree to which each characteristic applies to the employee | | | | | | | | | | | |
| 1 - Least possible degree | | 2 - Limited degree | | 3 - Normal degree | | 4 - Above average degree | | 5 - Outstanding degree | | | |
| CHARACTERISTICS | | | | | RATING | | | | | | |
| | | | | | NOT APPLICABLE | NOT APPLICABLE | 1 | 2 | 3 | 4 | 5 |
| GETS THINGS DONE | | | | | | | | | | X | |
| RESOURCEFUL | | | | | | | | | | X | |
| ACCEPTS RESPONSIBILITIES | | | | | | | | | | X | |
| CAN MAKE DECISIONS ON HIS OWN WHEN NECESSARY | | | | | | | | | | X | |
| DOES HIS JOB WITHOUT STRONG SUPPORT | | | | | | | | | | X | |
| FACILITATES SMOOTH OPERATION OF HIS OFFICE | | | | | | | | | | X | |
| WRITES EFFECTIVELY | | | | | | | | | | X | |
| SECURITY CONSCIOUS | | | | | | | | | | X | |
| FINANCIAL CAREFUL | | | | | | | | | | X | |
| DISCIPLINE IN ORG. MATING, MAINTAINING AND DISPOSING OF RECORDS | | | | | | | | | | X | |
| OTHER CHARACTERISTICS | | | | | | | | | | | |

SECRET

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Indicate strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the basis for determining future personnel actions.

Subject continues to perform his duties as Supervisor of ¹¹⁻² ~~Engineering~~ complex A&R activities in a competent manner. His knowledge of the technical aspects of his Sections' many functions help to insure a continuation of work flow and his ability to absorb and retain technical data related to his field of endeavor serves as an aid in the presentations of his numerous oral briefings.

One apparent weakness, which he continues to retain, is in his work relations with technical personnel; he has a tendency to drift from main topic under discussion to unrelated subjects, which, while they may be informative, decreases not only the Subject's productive capability, but, also that of the technical personnel.

| SECTION F CERTIFICATION AND COMMENTS | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|----------------------------------------|
| 1. BY EMPLOYEE | | |
| I certify that I have seen Sections A, B, C, D and E of this Report. | | |
| DATE | SIGNATURE OF EMPLOYEE | |
| 31 January 1961 | <i>H. E. Krasney</i> | |
| 2. BY SUPERVISOR | | |
| MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION | IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION | |
| 46 | | |
| IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON. | | |
| EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS | | REPORT MADE WITHIN LAST 90 DAYS |
| OTHER (Specify): | | |
| DATE | OFFICIAL TITLE OF SUPERVISOR | TYPED OR PRINTED NAME AND SIGNATURE |
| 31 January 1961 | DC/TSD/GARB/ | <i>[Signature]</i> |
| 3. BY REVIEWING OFFICIAL | | |
| <input checked="" type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.
<input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.
<input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.
<input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE. | | |
| COMMENTS OF REVIEWING OFFICIAL | | |
| | | |
| DATE | OFFICIAL TITLE OF REVIEWING OFFICIAL | TYPED OR PRINTED NAME AND SIGNATURE |
| 31 January 1961 | Chief, TSD/GARB | <i>[Signature]</i>
JOSEPH F. MARZEN |

SECRET

APPLICATION FOR FEDERAL EMPLOYMENT

37-103

| DO NOT WRITE IN THIS SPACE | APPLICATION NO. | 1. Kind of position applied for, or name of examination | Announcement No. | DO NOT WRITE IN THIS BLOCK
For Use of
Examining Office Only | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | | 2. Options for which you wish to be considered (if listed in examination announcement) | | <input type="checkbox"/> Appor. <input type="checkbox"/> Material <input type="checkbox"/> Entered Register:
<input type="checkbox"/> Noneppor. <input type="checkbox"/> Submitted <input type="checkbox"/> Returned | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 3. Primary place(s) of employment applied for (City and State) | | Notations: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 4. Name (First, middle, maiden, if any, last) | | App. Reviewed: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 5. Address (Number, Street, City, Zone, State) | | App. Approved: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 3700 Mass. Ave., N. W. Washington, D. C.
or c/o W. S. Linebarger, Box 407
Mt. Shasta, California WA-6-4646 | | <table border="1"><thead><tr><th>Option</th><th>Grade</th><th>Earned Rating</th><th>Preference</th><th>Augm. Rating</th></tr></thead><tbody><tr><td></td><td></td><td></td><td><input type="checkbox"/> 5 points (Ten.)</td><td></td></tr><tr><td></td><td></td><td></td><td><input type="checkbox"/> 10 points Comp. Dis.</td><td></td></tr><tr><td></td><td></td><td></td><td><input type="checkbox"/> Other 10 Point</td><td></td></tr><tr><td></td><td></td><td></td><td><input type="checkbox"/> Disab.</td><td></td></tr><tr><td></td><td></td><td></td><td><input type="checkbox"/> Being Investigated</td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr></tbody></table> | | | | | Option | Grade | Earned Rating | Preference | Augm. Rating | | | | <input type="checkbox"/> 5 points (Ten.) | | | | | <input type="checkbox"/> 10 points Comp. Dis. | | | | | <input type="checkbox"/> Other 10 Point | | | | | <input type="checkbox"/> Disab. | | | | | <input type="checkbox"/> Being Investigated | | | | | | | | | | | | | | | | | | | | | |
| | | Option | Grade | Earned Rating | Preference | Augm. Rating | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | <input type="checkbox"/> 5 points (Ten.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | <input type="checkbox"/> 10 points Comp. Dis. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | <input type="checkbox"/> Other 10 Point | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | <input type="checkbox"/> Disab. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | <input type="checkbox"/> Being Investigated | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. Home phone | | 7. Office phone | | Initials and date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FE-8-6400 | | 351-3295 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8. Legal or voting residence (State) | | 9. Height without shoes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| District of Columbia | | 5 feet 11 inches | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10. Weight | | 11. Sex | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 200 lbs. | | <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12. Marital status <input checked="" type="checkbox"/> Married | | 13. Birthplace (City and State, or foreign country) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Single (incl. widowed, divorced) | | Gallup, McKinley County, New Mexico | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14. Birth date (Month, day, year) | | 15. Social Security Number | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| December 11, 1916 | | 556 10 1750 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16. If you have ever been employed by the Federal Government, indicate last grade and job title: | | 17. Availability Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| GS-13, Intelligence Officer (Section Chief)
(Step 4) (GS-14 Slot)
Dates of service in that grade
From 12 Feb. 1957 To 20 September 1962 | | A. Lowest grade or pay you will accept
Per <input type="checkbox"/> or grade OPEN
C. Will you accept less than full-time employment (less than 40 hours per week)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
E. Will you accept employment: In Washington, D.C.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Outside U.S.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | B. Will you accept temporary appointment? (Acceptance or refusal of temporary employment will not affect your consideration for other appointments.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," indicate by "X" in appropriate box or boxes.
<input type="checkbox"/> 1 mo. or less <input checked="" type="checkbox"/> 1 to 4 months <input checked="" type="checkbox"/> 4 to 12 months
D. Are you willing to travel? <input type="checkbox"/> Not at all <input type="checkbox"/> Occasionally <input checked="" type="checkbox"/> Frequently
F. Will you accept appointment only in certain locations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list locations: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 17. AVAILABILITY INFORMATION | |
| A. Lowest grade or pay you will accept
Per <input type="checkbox"/> or grade OPEN
C. Will you accept less than full-time employment (less than 40 hours per week)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
E. Will you accept employment: In Washington, D.C.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Outside U.S.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | B. Will you accept temporary appointment? (Acceptance or refusal of temporary employment will not affect your consideration for other appointments.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," indicate by "X" in appropriate box or boxes.
<input type="checkbox"/> 1 mo. or less <input checked="" type="checkbox"/> 1 to 4 months <input checked="" type="checkbox"/> 4 to 12 months
D. Are you willing to travel? <input type="checkbox"/> Not at all <input type="checkbox"/> Occasionally <input checked="" type="checkbox"/> Frequently
F. Will you accept appointment only in certain locations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list locations: |

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 18. ACTIVE MILITARY SERVICE AND VETERAN PREFERENCE | |
| A. List Dates, Branch, and Serial or Service Number of All Active Service | |
| From 19 May 1941 To 5 Nov. 1943
29 Nov. 1946 To 8 Oct. 1949
5 Jan. 1950 To 20 Mar. 1953 | Branch of Service U. S. Army
Serial or Service Number RA 39080103 |
| B. Have you ever been discharged from the armed forces under other than honorable conditions?
<input type="checkbox"/> Yes (Give details in Item 59) <input checked="" type="checkbox"/> No | |
| C. Do you claim 5-point preference based on wartime military service?
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | D. Do you claim 5-point preference based on service during peacetime campaign? <input type="checkbox"/> Yes (Complete and attach Standard Form 15) <input checked="" type="checkbox"/> No |
| E. Do you claim 10 point preference? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," check type of preference claimed and complete and attach Standard Form 15, "Veteran Preference Claim" TYPE: <input type="checkbox"/> Compensable Disability <input type="checkbox"/> Disability <input type="checkbox"/> Wife <input type="checkbox"/> Widow <input type="checkbox"/> Mother | |

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| THIS SPACE FOR USE OF APPOINTING OFFICER ONLY | |
| The information given in answer to Question 18 has been verified with the discharge certificate and/or other proof which shows that the separation was under honorable conditions. | |
| VETERAN PREFERENCE ALLOWED: <input type="checkbox"/> 5-point <input type="checkbox"/> 10-point Comp. Disab. <input type="checkbox"/> Other 10-point <input type="checkbox"/> None | |
| Signature and title | Agency Date |

00000

Herman Edward Kinsey
Attachment I

1962 to Present - Associated as a technical consultant with Security Associates, Inc., Washington, D. C., specializing in commercial and industrial security.

1953 to 1962 - Intelligence with U. S. Government, Central Intelligence Agency, GS-13, \$11,415. As Chief of a small branch of highly specialized analysts, I exercised a wide variety of talents and was responsible for the following: the direction and administration of the branch operations; determined the course of action for further research effort within the branch; monitored and supervised a program of special personnel assessment; evaluated technical analyses and their relationship to specific cases; advised and consulted with members of Senior Staff components of CIA; delivered numerous technical briefings to both U. S. and foreign police and intelligence services; initiated and maintained projects carried out by private organizations such as universities, private consultants, and private research corporations. During the above period, I trained and briefed numerous others engaged in police and intelligence work. I also initiated and developed four technical systems currently in operation on a world-wide basis within CIA and wrote numerous articles for an intelligence periodical. In January 1962, CIA presented me with one of the largest individual Monetary Suggestion Awards ever given by that Agency.

December 11, 1916

Questioned Document Analyst - (Continued)

- b. Participated in establishing document analysis facilities in foreign governments and present plans call for continuation of this TDY consulting and advisory work.

Per request from Training, periodically briefs Foreign Intelligence Services and Agency personnel. These briefings cover general capabilities of the Section and are intended to inform the student of the question document problem.

II SUPERVISION RECEIVED:

The Section Chief receives technical requests directly from the customers and advises them and the Branch Chief on the technical problems, personnel, and other requirements for making determinations. Staff and Branch Chiefs establish guides on administrative matters. Review of accomplishments can only be made in the light of the customers application of evaluation results. Decisions required as a result of Section work are usually "Eyes Only" for customers application in offices of Senior Staffs of the major components in the Agency. The recommendations for participation in setting technical standards for mechanical and personnel identification methods or in financing such activity would be evaluated on the basis of the incumbent's evaluation of potential benefits to Agency technical services to intelligence efforts.

III QUALIFICATIONS REQUIRED:

Qualifications for this position will be written in the preliminary Qualification Standatds developed for the GS-1397.01, Document Analyst title, upgraded by Civil Service Commission Hearing, to GS-14, 1958.

December 11, 1916

I. DUTIES AND RESPONSIBILITIES

The analysis and Research Section is responsible for advisory, developmental and service work in the field of Questioned Document Analysis in support of overt and covert activities of the Agency. This includes technical testing and research into handwriting and document evaluation or authentication.

The Section Chief directs the assignments of projects, studies developments in scientific fields supporting authentication work, advises Agency officials on the current and long range capabilities in authentication or evaluation of documents and prepares recommendations for direction of the program.

Specifically:

1. The Section Chief, under the policy direction of Staff Chief, and administratively reporting to Branch Chief, provides administrative and technical supervision to Questioned Document Analysts in the Section and continually insures that their technical competence is maintained. The Section Chief reviews requests for analysis of documents and contents, establishes priorities for use of Section Personnel and suggests available external facilities for analysis or research.
2. Studies developments in Analysis and evaluation of documents and their contents as done by other Federal Agencies (FBI, Post Office, Treasury, Insurance Corporations, Private Practitioners in the Questioned Document Analysis field and Clinical Psychologists. Initiated inter-agency collaboration on use of technical facilities and indices of characteristics of paper and writing materials.
3. Makes review of recommendations of Document Analysts, Consultants, and Contract Employees engaged in analytical and projective studies, determines courses of action for additional research, confers with case officers and program leaders on the availability of additional data, time limits, operational potentials, etc., to develop additional facts of problems to be employed or to make final recommendations on the contents, validity, possible origination and processing of documents subject to study.
4. a. As advisor and consultant to major component program officials, provides authoritative material on the potential of identification involving documents and other physical items, makes periodic evaluations of case history records and provides other technical documentation service as may be required.

(Continued on Page 2)

1946 to 1953 - Worked as a Special Agent (MOS-1301) in the Army's Counter Intelligence Corp in the grade of Master Sergeant. My duties consisted of investigating crimes of security nature; member of a combat CIC team in Korea; two assignments as an instructor at the basic CIC School; enlisted Chief of the Technical Laboratory at the CIC Center, and enlisted Chief of Special Projects Technical Laboratory (CIC), Far East Command. During this period, I co-authored two text books for the CIC school and rewrote one other. Further, I experienced over 2,000 lecture hours as an instructor in the basic CIC school and lived and worked three years in two foreign countries.

1945 to 1946 - Held the position of Camp Superintendent of a 100 man forest camp engaged in timber disease control, U. S. Forest Service, California.

1941 to 1943 - Military Service, U. S. Army, Intelligence NCO, MOS 631, Combat Intelligence.

1939 to 1940 - Forest Guard, U. S. Forest Service, California

1935 to 1939 - Lumber Industry, California

Additional Information upon request.

3

Herbert Edward Kimsey
3100 Massachusetts Avenue, N. W.
Washington 16, D. C. 20016
Telephone Federal 8-6400

RESUME

I Personal

Age 40 - Married - No Children

II Education

- a - Grammar School - Oregon & California
- b - Junior High School - Oregon & California
- c - High School - Oregon & California
- d - College Level CED (USAFI) 1943

III Special School and Training Courses

- a - U. S. Forest Service School for Fire Control and Prevention, Shasta National Forest, California; 1939 and again in 1940.
- b - U. S. Army Chemical Warfare School for Instructors, Camp Claiborne, Louisiana, 1942
- c - U. S. Forest Service School for Fire Control & Prevention, Shasta National Forest, California, 1946.
- d - U. S. Forest School for Timber Disease Control (Elster Rust), Klamath National Forest, California, 1946
- e - U. S. Army Counter Intelligence Corp School for Special Agents, Fort Holabird, Maryland, 1946 and 1947.
- f - Instructor Guidance Course, U. S. CIC School, Fort Holabird, Maryland, 1947 and again in 1952.

IV Empirical Background

1962 to Present - Associated as a technical consultant with Security Associates, Inc., Washington, D. C., specializing in commercial and industrial security.

1953 to 1962 - Intelligence with U. S. Government, Central Intelligence Agency, GS-13, \$11,415. As Chief of a small branch of highly specialized analysts, I exercised a wide variety of talents and was responsible for the following: the direction and administration of the branch operations; determined the course of action for further research effort within the branch; monitored and supervised a program of special personnel assessment; evaluated technical analyses and their relationship to specific cases; advised and consulted with members of Senior Staff components of CIA; delivered numerous technical briefings to both U. S. and foreign police and intelligence services; initiated and maintained projects carried out by private organizations such as universities, private consultants, and private research corporations. During the above period, I trained and briefed numerous others engaged in police and intelligence work. I also initiated and developed four technical systems currently in operation on a world-wide basis within CIA and wrote numerous articles for an intelligence periodical. In January 1962, CIA presented me with one of the largest individual Monetary Suggestion Awards ever given by that Agency.

PLEASE BE SURE TO READ ATTACHED INSTRUCTIONS BEFORE COMPLETING ITEM 19

19. EXPERIENCE (Start with your PRESENT position (see work back))

| | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| May inquiry be made of your present employer regarding your character, qualifications, and record of employment? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| 1. | Dates of employment (month, year)
From <u>Unemployed</u> To <u>present time</u> | Exact title of position
<u>Intelligence Officer (See title)</u> | Number and kind of employees you supervised
<u>5 Analysts</u> | |
| Salary or earnings
Starting \$ <u>per</u>
Present \$ <u>per</u> | | Classification Grade
(If in Federal service)
<u>GS-13 Step 4</u> | Place of employment (City & State)
<u>Washington, D. C.</u> | Kind of business or organization
(Manufacturing, accounting, insurance, etc.)
<u>U. S. Govt.</u> |
| Name and address of employer (Firm, organization, etc.)
<u>Central Intelligence Agency
2430 E Street, N. W., Washington, D. C.</u> | | | Name, title, and present address of immediate supervisor
<u>Chief, Personnel Operations Division
ATTENTION:</u> | |
| Reason for wanting to leave | | | | |
| Description of work <u>NOT APPLICABLE</u> | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 2. | Dates of employment (month, year)
From <u>23 Mar. '53</u> To <u>20 Sept. '55</u> | Exact title of position
<u>Intelligence Officer (See title)</u> | Number and kind of employees you supervised
<u>5 Analysts</u> | |
| Salary or earnings
Starting \$ <u>5,060.00 per annum</u>
Final \$ <u>11,415.00 per annum</u> | | Classification Grade
(If in Federal service)
<u>GS-13 Step 4</u> | Place of employment (City & State)
<u>Washington, D. C.</u> | Kind of business or organization
(Manufacturing, accounting, insurance, etc.)
<u>U. S. Govt.</u> |
| Name and address of employer (Firm, organization, etc.)
<u>Central Intelligence Agency
2430 E Street, N. W., Washington, D. C.</u> | | | Name, title, and present address of immediate supervisor
<u>Chief, Personnel Operations Division
ATTENTION:</u> | |
| Reason for leaving <u>Reduction in force. Small section assimilated by 3 larger branches, and</u> | | | | |
| Description of work <u>my slot and grade eliminated.</u> | | | | |
| <u>SEE ATTACHED JOB DESCRIPTION AS APPROVED BY CIA</u> | | | | |
| <u>Also Attachment I</u> | | | | |
| | | | | |
| | | | | |
| | | | | |
| 3. | Dates of employment (month, year)
From <u>29 Nov. '46</u> To <u>20 Mar. '55</u> | Exact title of position
<u>Special Agent CIC</u> | Number and kind of employees you supervised
<u>0-5 Specialists</u> | |
| Salary or earnings
Starting \$ <u>900.00 per annum</u>
Final \$ <u>3300.00 per annum</u> | | Classification Grade
(If in Federal service)
<u>E-7 (E-7)</u> | Place of employment (City & State)
<u>Ft. Belvoir, Ill.</u> | Kind of business or organization
(Manufacturing, accounting, insurance, etc.)
<u>U. S. Army CIC</u> |
| Name and address of employer (Firm, organization, etc.)
<u>Investigative Control Section
AC of S - G-2, Ft. Belvoir, Maryland</u> | | | Name, title, and present address of immediate supervisor
<u>Willard F. Dougherty, Maj., Inf.
add. unknown (last supervisor)</u> | |
| Reason for leaving <u>Better job</u> | | | | |
| Description of work <u>Under Investigative Control Section, A. C. of S., G-2, Ft. Belvoir, Ill.;</u> | | | | |
| <u>Relieved Chief of Tech. Lab.; Instructor in Basic Agent Course; Member of Combat CIC</u> | | | | |
| <u>Team, Korea; Student in Basic Course and 2 Instructor Guidance Courses; Relieved</u> | | | | |
| <u>Chief of Special Projects, Tech. Laboratory. For these investigations crimes of security nature. (As lab. chief, specialized in Questioned Document Analysis.)</u> | | | | |

IF YOU NEED ADDITIONAL EXPERIENCE BLOCKS USE STANDARD FORM 57-A OR BLANK SHEETS
SEE INSTRUCTION SHEET

12-500-1

ATTACH SUPPLEMENTAL SHEETS OR FORMS HERE
• ANSWER ALL QUESTIONS CORRECTLY AND FULLY

10. SPECIAL QUALIFICATIONS AND SKILLS

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|----------------------------------------|------------------------------------------|
| A. Kind of license or Certificate (For example, pilot, teacher, registered nurse, lawyer, radio operator, E.P.A., etc.)
None | B. State or other licensing authority | C. Year of last license or certificate | D. Year of latest license or certificate |
| E. Special skills you possess and machines and equipment you can use. (For example, short wave radio, multithread, compass, dog, power, speed, lathe, transcribing machine, microscope or professional device)
Industrial machinery (lumber) including Diesel Motorotive (small); Foreign Laboratory equipment (question of symmetry); None; etc. | F. Approximate number of words per minute:
Typing U. A. Shorthand U. A. | | |
| G. Special qualifications are current in application. (For example, your most important qualifications (do not submit copies unless requested); your patents or inventions, books, speaking and publication experience, membership in professional or scientific society, etc., and honors and fellowships received)
Suggested and directed development of the Identikit System; Member of IAI; Over 200 lecture hours at CIO School; Co-author of the Manual and rewrote 2 others; wrote 3 articles and 1 technical book review for "Studies in Intelligence". | | | |

11. EDUCATION

| | | | | | | | | | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|---|---|---|---|----|----|----|-------------------------------------------------|----------------------|----------------------------------------------------|-------|-----------------------|----------------------|--|--|
| A. Place "X" in column indicating highest grade completed | | | | | | | | | | | | B. If you graduated from high school, give date | | C. Name and location of last high school attended | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | USAFI
X 1935 (GMD-1247) | | McCloud High School
McCloud, California | | | | | |
| D. Name and location of college or university | | | | | | | | | | | | Years completed | | Credit hours | | Degree received | Year received | | |
| None | | | | | | | | | | | | From | To | Day | Night | Semester | Quarter | | |
| E. Chief undergraduate college subjects | | | | | | | | | | | | Semester Hours Credit | Quarter Hours Credit | F. Chief graduate college subjects | | Semester Hours Credit | Quarter Hours Credit | | |
| None | | | | | | | | | | | | | | | | | | | |
| G. State major field of study at highest level of college work
College Level GMD (USAFI) 1943 | | | | | | | | | | | | | | | | | | | |
| H. Other schools or training (for example, trade, vocational, Armed Forces, or business) (Give for each the name and location of school, dates attended, subjects studied, certificates, and any other pertinent data)
Chemical Warfare School, 103rd Inf. Div. School - Camp Claiborne, La., 1 June 1943
Counter Intelligence Corps Basic Course, Fort Holabird, Md., 28 May 1947; Instructors Guidance Courses, Ft. Holabird, Maryland, 26 September 1947 and again 17 April 1952. | | | | | | | | | | | | | | | | | | | |

12. FOREIGN TRAVEL

Have you lived or traveled in any foreign countries?
☒ Yes ☐ No
 If "Yes," give in Item 19 names of countries, dates and length of time there and reason for purpose (military service, business, education or pleasure).

13. FOREIGN LANGUAGES

| Enter foreign language and indicate your knowledge of each by placing "X" in proper column | Reading | | Speaking | | Understanding | | Writing | |
|--------------------------------------------------------------------------------------------|---------|----|----------|----|---------------|----|---------|----|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| None | | | | | | | | |

14. REFERENCES

| List three persons living in the United States or territories of the United States who are NOT RELATED TO YOU AND WHO HAVE DIRECT KNOWLEDGE of your qualifications and assets for the purposes for which you are applying. Do not repeat names of supervisors listed under Item 19. | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|
| FULL NAME | PRESENT HOME ADDRESS (Number, street, city, state, and state) | BUSINESS OR OCCUPATION |
| (Lt. Col., Ret.) | Clarksburg, W. Va.
14 Eastview Drive
Silver Spring, Maryland
631 Patria / Liberty Drive
Falls Church, Virginia | Dir. Bur. of Ident.
Lab., P. O. Inst.
Spec. Inv. Analyst
FBI Laboratory
Dir. Mil. Assis.
Institute |

| ANSWER ALL QUESTIONS BY PLACING "X" IN PROPER COLUMN | | YES | NO |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------------|
| 27. Are you a citizen of the United States or American? If "No," give country of which you are a citizen. | | X | |
| 28. Are you now, or have you ever been, a member of the Communist Party, U.S.A., the Communist Political Association, the Young Communist League, or any Communist organization? | | | X |
| 29. Are you now, or have you ever been, a member of any foreign or domestic organization, association, movement, group, or combination of persons which is totalitarian, fascist, Communist, or subversive, or which has adopted, or shown, a policy of attempting or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States, or which seeks to alter the form of government of the United States by unconstitutional means? | | | X |
| If your answer to 28, and/or 29 above is "Yes," state on a separate sheet attached to and made a part of this application the names of all such organizations, associations, movements, groups or combination of persons and dates of membership. Give complete details of your activities therein and make any explanation you deem regarding your membership or activities. (See Instruction Sheet.) | | | |
| 30. Have you any physical handicap, chronic disease, or other disability? | | | X |
| 31. Have you ever had a nervous breakdown? | | | X |
| 32. Have you ever had tuberculosis? | | | X |
| If your answer to 30, 31, or 32 above is "Yes," give details in Item 39. | | | |
| 33. Have you ever been barred by the U.S. Civil Service Commission from taking examinations or accepting civil service appointments? If your answer is "Yes," give dates of and reasons for each disbarment in Item 39. | | | X |
| 34. Does the United States Government employ in a civilian capacity any relative of yours (by blood or marriage) with whom you live or have lived within the past 24 months? If your answer is "Yes," give in Item 39 for each such relative (1) full name; (2) present address; (3) relationship; (4) department or agency to which employed, and (5) kind of assignment. | | | X |
| 35. Do you receive or have you applied for an annuity from the United States or District of Columbia Government under any retirement act or any pension or other compensation for military or naval service? If your answer is "Yes," give details in Item 39. | | | X |
| 36. Are you an official or employee of any State, territory, county, or municipality? If your answer is "Yes," give details in Item 39. | | | X |
| 37. Have you ever been discharged (fired) from employment for any reason? | | X | |
| 38. Have you ever resigned (quit) after being informed that your employer intended to discharge (fire) you for any reason? If your answer is 37 or 38 above is "Yes," give details in Item 39. Show the name and address of employer, approximate date, and reasons for each case. This information should agree with statements made in Item 17—Experience. | | | X |
| 39. Have you ever been arrested, taken into custody, held for investigation or questioning, or charged by any law enforcement authority? (You may omit: (1) Traffic violations for which you paid a fine of \$50.00 or less; and (2) anything that happened before your 16th birthday. All other incidents must be included, even though they were dismissed or you merely furnished collateral.) | | | X |
| 40. While in the military service were you ever arrested for an offense which resulted in a trial by deck court or by summary, special, or general court-martial? | | | X |
| If your answer to 39 or 40 is "Yes," give details in Item 39, showing for each incident: (1) date, (2) charge, (3) place, (4) law enforcing authority or type of court or court-martial, and (5) action taken. | | | |
| 41. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS. Indicate item numbers to which answers apply. | | | |
| Item No. | Answer | Item No. | Answer |
| 22 | Japan, Military Service, 1940-9; 1950-1; Korea, Military Service, 1950-1; Panama 1959, Peru, 1959; | 35 | Because of bad eyes. When this was corrected, I returned to the same job under the same supervisor - brakeman on a diesel locomotive |
| If more space is required, use full sheets of paper approximately the same size as this page. Write on each sheet your name, date of birth, and exam. number title. Attach on inside of this application. | | | |
| ATTENTION: READ THE FOLLOWING PARAGRAPH CAREFULLY BEFORE SIGNING THIS APPLICATION | | | |
| A false or dishonest answer to any question in this application may be grounds for rating you ineligible for Federal employment, or for dismissing you after appointment, and may be punishable by fine or imprisonment (U.S. Code, Title 18, Sec. 1001). All statements made in the application are subject to investigation, including a check of your fingerprints, police records, and former employers. All information will be considered in determining your present fitness for Federal employment. | | | |
| CERTIFICATION | | | |
| I CERTIFY that all of the statements made in this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith. | | | |
| Signature of applicant _____ Date _____ | | | |

APPLICATION FOR FEDERAL EMPLOYMENT

37-103

| | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|--|
| DO NOT WRITE IN THIS SPACE | 1. Kind of position applied for, or name of examination | | Announcement No. | |
| | 2. Options for which you wish to be considered (if listed in examination announcement) | | | |
| | 3. Primary place(s) of employment applied for (City and State) | | | |
| | 4. Name (First, middle, maiden, if any, last)
Mr. Herman Edward Kinsey | | | |
| | 5. Address (Number, Street, City, Zone, State)
3700 Mass. Ave., N. W. Washington, D. C.
or c/o W. S. Linclinger, Box 407
Elk Grove, California 94626 | | | |
| | 6. Home phone
FE-2-5400 | | 7. Office phone
351-3295 | |
| | 8. Legal or voting residence (State)
District of Columbia | | | |
| | 9. Height without shoes
5 feet 11 inches | | 10. Weight
200 lbs. | |
| | 11. Sex
<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | | 12. Marital status <input checked="" type="checkbox"/> Married
<input type="checkbox"/> Single (incl. widowed, divorced) | |
| | 13. Birthplace (City and State, or foreign country)
Gallup, McKinley County, New Mexico | | | |
| 14. Birth date (Month, day, year)
December 11, 1916 | | 15. Social Security Number
556 10 1750 | | |
| 16. If you have ever been employed by the Federal Government, indicate last grade and job title:
GS-13, Intelligence Officer (Section Chief)
(Step 4) (GS-14 Slot)
Dates of service in that grade:
From 12 Feb. 1957 To 20 September 1962 | | | | |

| DO NOT WRITE IN THIS BLOCK
For Use of
Examining Office Only | | | | |
|-------------------------------------------------------------------|------------------------------------|-------------------------------------------|----------------------------------------------|--------------|
| <input type="checkbox"/> Appor. | <input type="checkbox"/> Material | <input type="checkbox"/> Entered Register | | |
| <input type="checkbox"/> Nonappor. | <input type="checkbox"/> Submitted | <input type="checkbox"/> Returned | | |
| Notations: | | | | |
| App. Reviewed: | | | | |
| App. Approved: | | | | |
| Option | Grade | Earned Rating | Preference | Augm. Rating |
| | | | <input type="checkbox"/> 5 points (1st) | |
| | | | <input type="checkbox"/> 10 points Comp. Ex. | |
| | | | <input type="checkbox"/> Other 10 Points | |
| | | | <input type="checkbox"/> Disal. | |
| | | | <input type="checkbox"/> Being Investigated | |
| Initials and date | | | | |

| | | | |
|----------------------------------------------------------------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| A. Lowest grade to pay you will accept | | B. Will you accept temporary appointment? (Acceptance or refusal of temporary employment will not affect your consideration for other appointments.) | |
| Per | Per | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| or grade OPEN | | <input checked="" type="checkbox"/> 1 mo. or less | <input type="checkbox"/> 1 to 4 months |
| C. Will you accept less than full-time employment (less than 40 hours per week)? | | D. Are you willing to travel? | |
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not at all | <input type="checkbox"/> Occasionally |
| E. Will you accept employment in Washington, D.C.? | | F. Will you accept appointment only in certain locations? | |
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | If "Yes," list locations: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

| 18. ACTIVE MILITARY SERVICE AND VETERAN PREFERENCE | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------|
| A. List Dates, Branch, and Serial or Service Number of All Active Service | | |
| From | To | Branch of Service |
| 19 May 1941 | 9 Nov. 1943 | U. S. Army |
| 29 Nov. 1945 | 8 Oct. 1949 | |
| 6 Jan. 1950 | 30 Mar. 1953 | |
| Serial or Service Number
RA 39020108 | | |
| B. Have you ever been discharged from the armed forces under other than honorable conditions? | | |
| <input type="checkbox"/> Yes (Give details in Item 57) <input checked="" type="checkbox"/> No | | |
| C. Do you claim 5-point preference based on wartime military service? | | |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| D. Do you claim 5-point preference based on service during peacetime campaign? | | |
| <input type="checkbox"/> Yes (Complete and attach Standard Form 15) <input checked="" type="checkbox"/> No | | |
| E. Do you claim 10-point preference? | | |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," check type of preference claimed and complete and attach Standard Form 15, "Veteran Preference Claim" TYPE <input type="checkbox"/> Compensable disability <input type="checkbox"/> Disability <input type="checkbox"/> Wife <input type="checkbox"/> Widow <input type="checkbox"/> Minor | | |

| THIS SPACE FOR USE OF APPOINTING OFFICER ONLY | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------|--|
| The information given in answer to Question 18 has been verified with the discharge certificate and/or other proof which shows that the separation was under honorable conditions. | | | |
| VETERAN PREFERENCE ALLOWED <input type="checkbox"/> 5 point <input type="checkbox"/> 10 point Comp. Ex. <input type="checkbox"/> Other 10 points <input type="checkbox"/> None | | | |
| Signature and title | | Date | |

PLEASE BE SURE TO READ ATTACHED INSTRUCTIONS BEFORE COMPLETING ITEM 19
 19. EXPERIENCE (Start with your PRESENT position and work back)

May inquiry be made of your present employer regarding your character, qualifications, and record of employment? ☒ Yes ☐ No

| | | | | |
|---------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------------------------------------------------------------------|---------------------------------------------|
| 1 | Dates of employment (month, year)
From <u>Dec 1951</u> To <u>present time</u> | | Exact title of position | Number and kind of employees you supervised |
| | Salary or earnings
Starting \$ <u> </u> per <u> </u>
Present \$ <u> </u> per <u> </u> | | | |
| Classification Grade
(If in Federal service) | | Place of employment (City & State) | Kind of business or organization
(Manufacturing, accounting, insurance, etc.) | |
| Name and address of employer (firm, organization, etc.) | | | Name, title, and present address of immediate supervisor | |

Reason for wanting to leave

Description of work NOT APPLICABLE

| | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| 2 | Dates of employment (month, year)
From <u>23 Nov 53</u> To <u>20 Sept 56</u> | | Exact title of position
<u>Intelligence Off. (See Chief)</u> | Number and kind of employees you supervised
<u>4 Analysts</u> |
| | Salary or earnings
Starting \$ <u>5,060.00</u> per annum
Final \$ <u>11,415.00</u> per annum | | | |
| Classification Grade
(If in Federal service)
<u>GS-13 Step 4</u> | | Place of employment (City & State)
<u>Washington, D. C.</u> | Kind of business or organization
(Manufacturing, accounting, insurance, etc.)
<u>U. S. Govt.</u> | |
| Name and address of employer (firm, organization, etc.)
<u>Central Intelligence Agency</u>
<u>2430 E Street, N. W., Washington, D. C.</u> | | | Name, title, and present address of immediate supervisor
<u>Chief, Personnel Operations Division</u>
<u>ATTENTION:</u> | |

Reason for leaving Reduction in force. Small section assimilated by 3 larger branches, and
 Description of work slot and grade eliminated.

SEE ATTACHED JOE DESCRIPTION AS APPROVED BY CIA
Also Attachment 1

| | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| 3 | Dates of employment (month, year)
From <u>29 Nov 54</u> To <u>20 Mar 55</u> | | Exact title of position
<u>Special Agent CIC</u> | Number and kind of employees you supervised
<u>0-5 Technician</u> |
| | Salary or earnings
Starting \$ <u>900.00</u> per annum
Final \$ <u>3300.00</u> per annum | | | |
| Classification Grade
(If in Federal service)
<u>E/Sgt. (E-7)</u> | | Place of employment (City & State)
<u>Ft. Holabird, Md.</u> | Kind of business or organization
(Manufacturing, accounting, insurance, etc.)
<u>U. S. Army CIC</u> | |
| Name and address of employer (firm, organization, etc.)
<u>Investigative Control Section</u>
<u>AC of S - G-2, Ft. Holabird, Maryland</u> | | | Name, title, and present address of immediate supervisor
<u>Millard F. Dougherty, Maj., Inf.</u>
<u>add. unknown (last supervisor)</u> | |

Reason for leaving Left job

Description of work Under Investigative Control Section, A. C. of S., G-2, Ft. Holabird, Md.;
Enlisted Chief of Tech. Lab.; Instructor in Basic Agent Course; Member of Combat CIC
Team, Korea; Student in Basic Course and 2 Instructor Guidance Courses; Enlisted
Chief of Special Projects, Tech. Laboratory. For last, investigated crimes of se-
curity nature. (As lab. chief, specialized in questioned document analysis.)

IF YOU NEED ADDITIONAL EXPERIENCE BLOCKS USE STANDARD FORM 57-A OR BLANK SHEETS
 SEE INSTRUCTION SHEET

Herman Edward Kinsey

December 11, 1916

4. 15 April 1945 - 1 October 1946 Camp Superintendent 100 employees, laborers
\$269 1/4 per annum
\$302 1/2 per annum SP-7
Yreka, California U. S. Forest Service

U. S. Forest Service, Yreka, California Art London, % USFS, Yreka, California

Enlist in Counter Intelligence Corps, U. S. Army

Supervised 100-man forest camp for the purpose of controlling timber disease.

5. 5 November 1943 - 15 April 1945 Laborer None

\$0.90 per hour

\$1.10 per hour Unknown

McCloud, California Lumber,

McCloud River Lumber Company, McCloud, California- James Herbert, McCloud, Calif.

Return to the United States Forest Service.

Operated Lumber carrier and brakeman on small diesel locomotive.

6. 19 May 1941 to 5 November 1943 Sergeant MOS 631 up to 14 Intelligence Analysts
Intelligence NCO
Combat Intelligence
\$21.00 per month
\$75.00 per month
Sergeant Continental Limits of United States U. S. Army
Supervisor - Unknown

U. S. Army

Honorable Discharge

Supervised S-2 Section in Brigade HQ for the purpose of collection and evaluation of information on the subject of enemy military operations.

7. 1 May 1939 to 10 May 1941 - Forest Guard None

\$100 per month Unknown McCloud, California U. S. Forest Service

United States Forest Service Earl Sullaway, McCloud, California
McCloud, California

Enlisted in the U. S. Army under draft requirement but not yet called for service.

Prevention and Suppression of forest fires.

8. January 1935 to May 1939 Laborer

Laborer in lumber & oil industry.

Herman Edward Kimsey
3700 Massachusetts Avenue, N. W.
Washington 16, D. C. 20016
Telephone Federal 8-5400

RESUME

I Personal

Age 40 - Married - No Children

II Education

- a - Grammar School - Oregon & California
- b - Junior High School - Oregon & California
- c - High School - Oregon & California
- d - College Level GED (USAFI), 1948

III Special School and Training Courses

- a - U. S. Forest Service School for Fire Control and Prevention, Shasta National Forest, California; 1939 and again in 1940.
- b - U. S. Army Chemical Warfare School for Instructors, Camp Claiborne, Louisiana, 1942
- c - U. S. Forest Service School for Fire Control & Prevention, Shasta National Forest, California, 1946.
- d - U. S. Forest School for Timber Disease Control (Blister Rust), Klamath National Forest, California, 1946
- e - U. S. Army Counter Intelligence Corp School for Special Agents, Fort Holabird, Maryland, 1946 and 1947.
- f - Instructor Guidance Course, U. S. CIC School, Fort Holabird, Maryland, 1947 and again in 1952.

IV Empirical Background

1962 to Present - Associated as a technical consultant with Security Associates, Inc., Washington, D. C., specializing in commercial and industrial security.

1953 to 1962 - Intelligence with U. S. Government, Central Intelligence Agency, GS-13, \$11,415. As Chief of a small branch of highly specialized analysts, I exercised a wide variety of talents and was responsible for the following: the direction and administration of the branch operations; determined the course of action for further research effort within the branch; monitored and supervised a program of special personnel assessment; evaluated technical analyses and their relationship to specific cases; advised and consulted with members of Senior Staff components of CIA; delivered numerous technical briefings to both U. S. and foreign police and intelligence services; initiated and maintained projects carried out by private organizations such as universities, private consultants, and private research corporations. During the above period, I trained and briefed numerous others engaged in police and intelligence work. I also initiated and developed four technical systems currently in operation on a world-wide basis within CIA and wrote numerous articles for an intelligence periodical. In January 1962, CIA presented me with one of the largest individual Monetary Suggestion Awards ever given by that Agency.

1946 to 1955 - Worked as a Special Agent (HQS-1301) in the Army's Counter Intelligence Corp in the grade of Master Sergeant. My duties consisted of investigating crimes of security nature; member of a combat CIC team in Korea; two assignments as an instructor at the basic CIC School; enlisted Chief of the Technical Laboratory at the CIC Center, and enlisted Chief of Special Projects Technical Laboratory (CIC), Far East Command. During this period, I co-authored two text books for the CIC school and rewrote one other. Further, I experienced over 2,000 lecture hours as an instructor in the basic CIC school and lived and worked three years in two foreign countries.

1945 to 1946 - Held the position of Camp Superintendent of a 100 man forest camp engaged in timber disease control, U. S. Forest Service, California.

1941 to 1943 - Military Service, U. S. Army, Intelligence NCO, MOS 631, Combat Intelligence.

1939 to 1940 - Forest Guard, U. S. Forest Service, California

1935 to 1939 - Lumber Industry, California

Additional Information upon request.

Herbert Edward Kinsey

December 11, 1916

I. DUTIES AND RESPONSIBILITIES

The analysis and Research Section is responsible for advisory, developmental and service work in the field of Questioned Document Analysis in support of overt and covert activities of the Agency. This includes technical testing and research into handwriting and document evaluation or authentication.

The Section Chief directs the assignments of projects, studies developments in scientific fields supporting authentication work, advises Agency officials on the current and long range capabilities in authentication or evaluation of documents and prepares recommendations for direction of the program.

Specifically:

1. The Section Chief, under the policy direction of Staff Chief, and administratively reporting to Branch Chief, provides administrative and technical supervision to Questioned Document Analysts in the Section and continually insures that their technical competence is maintained. The Section Chief reviews requests for analysis of documents and contents, establishes priorities for use of Section Personnel and suggests available external facilities for analysis or research.
2. Studies developments in Analysis and evaluation of documents and their contents as done by other Federal Agencies (FBI, Post Office, Treasury, Insurance Corporations, Private Practitioners in the Questioned Document Analysis field and Clinical Psychologists. Initiated inter-agency collaboration on use of technical facilities and indices of characteristics of paper and writing materials.
3. Makes review of recommendations of Document Analysts, Consultants, and Contract Employees engaged in analytical and projective studies, determines courses of action for additional research, confers with case officers and program leaders on the availability of additional data, time limits, operational potentials, etc., to develop additional facts of problems to be employed or to make final recommendations on the contents, validity, possible origination and processing of documents subject to study.
4. a. As advisor and consultant to major component program officials, provides authoritative material on the potential of identification involving documents and other physical items, makes periodic evaluations of case history records and provides other technical documentation service as may be required.

(Continued on Page 2)

Herman Edward Kimsey

December 11, 1916

4. 15 April 1945 - 1 October 1946 Camp Superintendent 100 employees, laborers
\$2694 per annum
\$3021 per annum SP-7
Yreka, California U. S. Forest Service
U. S. Forest Service, Yreka, California Art London, § USFS, Yreka, California
Enlist in Counter Intelligence Corps, U. S. Army
Supervised 100-man forest camp for the purpose of controlling timber disease.
5. 5 November 1943 - 15 April 1945 Laborer None
\$0.90 per hour
\$1.10 per hour Unknown McCloud, California Lumber
McCloud River Lumber Company, McCloud, California- James Herbert, McCloud, Calif.
Return to the United States Forest Service.
Operated lumber carrier and brakeman on small diesel locomotive.
6. 19 May 1941 to 5 November 1943 Sergeant MOS 631 up to 14 Intelligence Analysts
Intelligence NCO
Combat Intelligence
\$21.00 per month Sergeant Continental Limits of United States U. S. Army
\$75.00 per month Supervisor - Unknown
U. S. Army
Honorable Discharge
Supervised S-2 Section in Brigade HQ for the purpose of collection and evaluation
of information on the subject of enemy military operations.
7. 1 May 1939 to 10 May 1941 - Forest Guard None
\$100 per month Unknown McCloud, California U. S. Forest Service
United States Forest Service Earl Sullaway, McCloud, California
McCloud, California
Enlisted in the U. S. Army under draft requirement but not yet called for service.
Prevention and Suppression of forest fires.
8. January 1935 to May 1939 Laborer
Laborer in lumber oil industry.

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Herman Edward Kimsey

December 11, 1916

Questioned Document Analyst (Continued)

- b. Participated in establishing document analysis facilities in foreign governments and present plans call for continuation of this TUI consulting and advisory work.

Per request from Training, periodically briefs Foreign Intelligence Services and Agency personnel. These briefings cover general capabilities of the Section and are intended to inform the student of the question document problem.

II SUPERVISION RECEIVED:

The Section Chief receives technical requests directly from the customers and advises them and the Branch Chief on the technical problems, personnel, and other requirements for making determinations. Staff and Branch Chiefs establish guides on administrative matters. Review of accomplishments can only be made in the light of the customers application of evaluation results. Decisions required as a result of Section work are usually "Eyes Only" for customers application in offices of Senior Staffs of the major components in the Agency. The recommendations for participation in setting technical standards for mechanical and personnel identification methods or in financing such activity would be evaluated on the basis of the incumbent's evaluation of potential benefits to Agency technical services to intelligence efforts.

III QUALIFICATIONS REQUIRED:

Qualifications for this position will be written in the preliminary Qualification Standards developed for the GS-1397.01, Document Analyst title, upgraded by Civil Service Commission Hearing, to GS-14, 1958.

ATTACH SUPPLEMENTAL SHEETS OR FORMS HERE
• ANSWER ALL QUESTIONS CORRECTLY AND FULLY

20. SPECIAL QUALIFICATIONS AND SKILLS

| | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------|------------------------------------------|
| A. Kind of license or certificate (For example, pilot, teacher, registered nurse, lawyer, radio operator, C.P.A., etc.) | B. State or other licensing authority | C. Year of first license or certificate | D. Year of latest license or certificate |
| None | | | |
| E. Special skills you possess and machines and equipment you can use. (For example, short wave radio, multilink, computers, key punch, turret lathe, transcribing machine, scientific or professional devices) | | F. Approximate number of words per minute: | |
| Industrial machinery (lumber) including Diesel Locomotive (small); Forensic laboratory equipment (questioned document); Identi-Kit Opn.; Tech. Intelligence Equipment. | | Typing | Shorthand |
| G. Special qualifications not covered in application. (For example, your most important publications (do not submit copies unless requested), your patents or inventions, public speaking and publications experience, membership in professional or honorary societies, etc., and honors and fellowships received.) | | H. A. | H. A. |
| Suggested and directed development of the Identi-Kit System; Member of IAI; Over 200 lecture hours at CIC School; Co-author of CIC Manual and rewrote 2 others; wrote 3 articles and 1 technical book review for "Studies in Intelligence". | | | |

21. EDUCATION

| | | | | | | | | | | | | | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|---|---|---|---|----|----|----|-------------------------------------------------|----------------------|---------------------------------------------------|-------|--------------|---------|-----------------------|----------------------|
| A. Place "X" in column indicating highest grade completed | | | | | | | | | | | | B. If you graduated from high school, give date | | C. Name and location of last high school attended | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | UDART | | McCloud High School | | | | | |
| | | | | | | | | | | | X | 1935 (GED-1947) | | McCloud, California | | | | | |
| D. Name and location of college or university | | | | | | | | | | | | Dates attended | | Years completed | | Credit hours | | Degree received | Year received |
| None | | | | | | | | | | | | From | To | Day | Night | Semester | Quarter | | |
| E. Chief undergraduate college subjects | | | | | | | | | | | | Semester Hours Credit | Quarter Hours Credit | F. Chief graduate college subjects | | | | Semester Hours Credit | Quarter Hours Credit |
| None | | | | | | | | | | | | | | | | | | | |
| G. State major field of study at highest level of college work | | | | | | | | | | | | | | | | | | | |
| College Level GED (UDART) 1949 | | | | | | | | | | | | | | | | | | | |
| H. Other schools of training (for example, trade, vocational, Armed Forces, or business). Give for each the name and location of school, dates attended, subjects studied, certificates, and any other pertinent data. | | | | | | | | | | | | | | | | | | | |
| Chemical Warfare Sch., 103rd Inf. Div. School - Camp Claiborne, La., 1 June 1943 | | | | | | | | | | | | | | | | | | | |
| Counter Intelligence Corps Basic Course, Fort Holabird, Md., 20 May 1947; Instructors | | | | | | | | | | | | | | | | | | | |
| Guidance Courses, Ft. Holabird, Maryland, 26 September 1947 and again 17 April 1952. | | | | | | | | | | | | | | | | | | | |

22. FOREIGN TRAVEL

Have you lived or traveled in any foreign countries?

☒ Yes ☐ No

If "Yes," give in Item 39 names of countries, dates and length of time spent there and reason or purpose (military service, business, education, or vacation).

23. FOREIGN LANGUAGES

| List foreign language and indicate your knowledge of each by placing "X" in proper column | Reading | | Speaking | | Understanding | | Writing | |
|-------------------------------------------------------------------------------------------|---------|----|----------|----|---------------|----|---------|----|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| None | | | | | | | | |

24. REFERENCES

List three persons living in the United States or territories of the United States who are NOT RELATED TO YOU AND WHO HAVE DEFINITE KNOWLEDGE of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed under Item 19.

| FULL NAME | PRESENT BUSINESS OR HOME ADDRESS (Number, Street, City, Zone, and State) | BUSINESS OR OCCUPATION |
|-------------------|--------------------------------------------------------------------------|--------------------------------------|
| (Lt. Col., Ret.) | Starkburg, Maryland | Dir. Bur. of Ident. Lab., P. O. Post |
| | 18 Eastmoor Drive | Spec. Rec. Analyst |
| | Silver Spring, Maryland | FBI Laboratory |
| | 601 Patrick Henry Drive | Dir. Mil. Assis. Institute |
| Major Gen. (Ret.) | Halls Church, Virginia | |

| ANSWER | | QUESTIONS BY PLACING "X" IN PROPER COL. | | YES | NO |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-----------------------------------------|-----------------------------------------|------------|----|
| 25. Are you a citizen of the United States of America? If "No," give country of which you are a citizen: | | | | X | |
| 26. Are you now, or have you ever been, a member of the Communist Party, U.S.A., the Communist Political Association, the Young Communist League, or any Communist organization? | | | | | X |
| 27. Are you now or have you ever been a member of any foreign or domestic organization, association, movement, group, or combination of persons which is totalitarian, Fascist, Communist, or subversive, or which has adopted, or shows, a policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States, or which seeks to alter the form of government of the United States by unconstitutional means? | | | | | X |
| If your answer to 26 and/or 27 above is "Yes," state on a separate sheet attached to and made a part of this application the names of all such organizations, associations, movements, groups or combination of persons and dates of membership. Give complete details of your activities therein and make any explanation you desire regarding your membership or activities. (See Instruction Sheet.) | | | | | |
| 28. Have you any physical handicap, chronic disease, or other disability? | | | | | X |
| 29. Have you ever had a nervous breakdown? | | | | | X |
| 30. Have you ever had tuberculosis? | | | | | X |
| If your answer to 28, 29, or 30 above is "Yes," give details in Item 39. | | | | | |
| 31. Have you ever been barred by the U.S. Civil Service Commission from taking examinations or accepting civil service appointment? (If your answer is "Yes," give dates of and reasons for such debarment in Item 39.) | | | | | X |
| 32. Does the United States Government employ in a civilian capacity any relative of yours (by blood or marriage) with whom you live or have lived within the past 24 months? | | | | | X |
| If your answer is "Yes," give in Item 39 for EACH such relative (1) full name; (2) present address; (3) relationship; (4) department or agency by which employed, and (5) kind of appointment. | | | | | |
| 33. Do you receive or have you applied for an annuity from the United States or District of Columbia Government under any retirement act or any pension or other compensation for military or naval service? | | | | | X |
| If your answer is "Yes," give details in Item 39. | | | | | |
| 34. Are you an official or employee of any State, territory, county, or municipality? | | | | | X |
| If your answer is "Yes," give details in Item 39. | | | | | |
| 35. Have you ever been discharged (fired) from employment for any reason? | | | | X | |
| 36. Have you ever resigned (quit) after being informed that your employer intended to discharge (fire) you for any reason? | | | | | X |
| If your answer to 35 or 36 above is "Yes," give details in Item 39. Show the name and address of employer, approximate date, and reasons in each case. This information should agree with statements made in Item 19—Experience. | | | | | |
| 37. Have you ever been arrested, taken into custody, held for investigation or questioning, or charged by any law enforcement authority? (You may omit: (1) Traffic violations for which you paid a fine of \$50.00 or less, and (2) anything that happened before your 16th birthday. All other incidents must be included, even though they were dismissed or you merely testified collateral.) | | | | | X |
| 38. While in the military service were you ever arrested for an offense which resulted in a trial by court-martial or by summary, special, or general court-martial? | | | | | X |
| If your answer to 37 or 38 is "Yes," give details in Item 39, showing for each incident: (1) date, (2) charge, (3) place, (4) law-enforcing authority or type of court or court-martial, and (5) action taken. | | | | | |
| 39. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS. Indicate item numbers to which answers apply. | | | | | |
| Item No. | Answer | Item No. | Answer | | |
| 22 | Japan, Military Service, 1942-9, | 35 | Because of bad eyes. When this was | | |
| | 1950-1; Korea, Military Service | | corrected, I returned to the same job | | |
| | 1950-1; Panama 1959, Peru, 1959; | | under the same supervisor - brakeman on | | |
| | | | a diesel locomotive. | | |
| If more space is required, use full sheets of paper approximately the same size as this page. Write on each sheet your name, date of birth, and examination title. Attach on inside of this application. | | | | | |
| ATTENTION: READ THE FOLLOWING PARAGRAPH CAREFULLY BEFORE SIGNING THIS APPLICATION | | | | | |
| A false or dishonest answer to any question in this application may be grounds for rating you ineligible for Federal employment, or for dismissing you after appointment, and may be punishable by fine or imprisonment (U.S. Code, Title 18, Sec. 1001). All statements made in the application are subject to investigation, including a check of your fingerprints, police records, and former employers. All information will be considered in determining your present fitness for Federal employment. | | | | | |
| CERTIFICATION | | | | | |
| I CERTIFY that all of the statements made in this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith. | | | | | |
| Signature of applicant _____ | | | | Date _____ | |

(Sign in ink)

U.S. GOVERNMENT PRINTING OFFICE: 1957 O-358122

16-70419-1

RESUME

Herman Edward Kimsey
3700 Massachusetts Ave., N.W.
Washington, D.C. 20016
Telephone: Federal 8-6400

PERSONAL

Age: 46
Marital Status: Married, no children

EDUCATION

Grammar School - Oregon and California
Junior High School - Oregon and California
High School - Oregon and California
College Level GED (USAFI) 1948

Special Schools and Training Courses:

1. U.S. Forest Service School for Fire Control and Prevention, Shasta, National Forest, California; 1939 and again in 1940.
2. U.S. Army Chemical Warfare School for Instructors, Camp Claiborne, Louisiana, 1942.
3. U.S. Forest Service School for Fire Control and Prevention, Shasta, National Forest, California, 1945.
4. U.S. Forest School for Timber Disease Control (Blister Rust) Klamath National Forest, California, 1946.
5. U.S. Army Counter Intelligence Corp School for Special Agents, Fort Holabird, Maryland, 1946 and 1947.
6. Instructor Guidance Course, U.S. Army CIC School, Fort Holabird, Maryland, 1947 and again in 1952.

EMPIRICAL BACKGROUND

From 1962 to present, I have been associated, as a technical consultant, with Security Associates, Inc., Washington, D.C. specializing in commercial and industrial security.

From 1953 to 1962, I was an Intelligence Officer with the U. S. Government, Central Intelligence Agency (Annual Salary \$11,415, GS-13). As Chief of a small branch of highly specialized analysts, I exercised a wide variety of talents and was responsible for: the direction and administration of the branch operations; determined the course of action for further research effort within the branch; monitored and supervised a program of special personnel assessment; evaluated technical analyses and their relationship to specific cases; advised and consulted with Senior Staff components of CIA; delivered numerous technical briefings to both U.S. and foreign police and intelligence services; initiated and maintained liaison with other U.S. Government components; activated and directed research projects carried out by private organizations such as universities, private consultants, and private research corporations. During the above period, I trained and briefed numerous other agencies engaged in police and intelligence.

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I also initiated and developed four technical systems currently in operation on a world-wide basis within CIA and wrote numerous articles for an intelligence periodical. In January 1962, CIA presented me with one of the largest individual Monetary Suggestion Awards ever given by that Agency.

From 1946 to 1953, I worked as a Special Agent(MOS-1301) in the Army's Counter Intelligence Corp in the grade of Master/Sergeant. My duties consisted of investigating crimes of security nature; member of a combat CIC team in Korea; two assignments as an instructor at the basic CIC School; enlisted Chief of the Technical Laboratory at the CIC Center, and enlisted Chief of Special Projects Technical Laboratory(CIC), Far East Command. During this period, I co-authored two textbooks for the CIC School and rewrote one other. Further, I experienced over 2,000 lecture hours as an instructor in the basic CIC School and lived and worked three years in two foreign countries.

1945-1946 I held the position of Camp Superintendent of a 100-man forest camp engaged in timber disease control, U.S. Forest Service, California.

1941-1943 Military Service, U.S. Army, Intelligence NCO, MOS 631, Combat Intelligence.

1939-1940 Forest Guard, U.S. Forest Service, California

1935-1939 Lumber Industry, California

Additional information upon request

Herman Edward Kinsey
37 Massachusetts Ave., N. W.
Washington 16, D. C. (20016)
Telephone: Federal 5-6400

RESUME

- I Personal -
Age 46 - Married - No Children.

- II Education -
a - Grammar School - Oregon & California.
b - Junior High School - Oregon & California.
c - High School - Oregon & California.
d - College Level CED (USAFI) 1948.

- III Special Schools and Training Courses -
a - U. S. Forest Service School for Fire Control and Prevention, Shasta, National Forest, California; 1932 and again in 1949.
b - U. S. Army Chemical Warfare School for Instructors, Camp Claiborne, Louisiana, 1942.
c - U. S. Forest Service School for Fire Control & Prevention, Shasta, National Forest California, 1945.
d - U. S. Forest School for Timber Disease Control (Blister Rust) Klamath National Forest, California, 1946.
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1939-1940 Forest Guard, U. S. Forest Service, California.

1935-1939 Lumber Industry, California.

Additional information upon request.

NO FURTHER INFORMATION
1967

Dec. 11, 1916

Document Analyst - GS-14 (Section Chief) - page 2.

b. Section Chief participated in establishing document analysis facilities in foreign governments and present plans call for continuation of this TDY consulting and advisory work.

c. Per request from Training, Section Chief periodically briefs Foreign Intell. Services and Agency personnel. These briefings cover general capabilities of the Section and are intended to inform the student of the questioned document problem.

II. SUPERVISION RECEIVED:

The Section Chief receives technical requests directly from customers and advises them and the Branch Chief on the technical problems, personnel, and other requirements for making determinations. Staff and Branch Chiefs establish guides on administrative matters. Review of accomplishments can only be made in the light of the customers application of evaluation results. Decisions required as a result of Section work are usually "Eyes Only" for customers application in offices of Senior Staffs of the major components in the Agency. The recommendations for participation in setting technical standards for mechanical and personnel identification methods or in financing such activity would be evaluated on the basis of the incumbent's evaluation of potential benefit to Agency technical services to intelligence efforts.

III. QUALIFICATIONS REQUIRED:

Qualifications for this position will be written in the preliminary Qualification Standards developed for the GS-1377.01, Document Analyst title, upgraded by Civil Service Commission Hearing, to GS-14, 1958.

Handwritten signature and date:
3 Jan 1967

SECRET

REPRODUCTION MASTERS

BIOGRAPHIC PROFILE

H a n d l e W i t h C a r e

SECRET

00000

Republican National Committee S-E-C-R-E-T (When Filled In) *Attn: Mr. [unclear] No. 8-7810*

NAME *Kinsey, Herman E. [unclear]* Title, Grade & Salary *Librarian: SS-14* Office & Extension *7-510* DOB *4/16/16* EOD *1/8/3* LWD *7/2/70* Type Referral *101*

Reference Data *R6 910110 - 17-2* OP Interviewer *E. V. [unclear]*

Date of Interview

Details of Out Placement (Including Cover & Security Data)

10/1/62 *Kinsey brought in copy of 57 which he had checked & indicated he had been contacted. Said in one week he received a communication from [unclear] through a lady named [unclear] & the FBI advised him to be careful of anyone under such pretenses. Said many people, [unclear] know what he wants & promised to check back if he was having any luck.*

Sept 3 64 *Subject came in late 1963 and was given assistance in filing for FAMS and he qualified at a grade 13/14 level. He was referred to [unclear] several jobs and I have just been informed that he has taken a position with the Republican National Committee as assistant security officer.*

Nov 1964 *Subject called to advise me that since the republicans had been beaten that he was out of a job.*

Dec 1965 *Called Mr. Kinsey and referred him to The Plaza hotel in New York for a position as security officer. I called the personnel officer of the hotel and told him of Mr. Kinsey's qualifications and set up an appointment for an interview. Mr. Kinsey went for the interview and was offered the position which paid \$1.60 per hour and meals. At that time he was being considered for another position and asked time to consider offer.*

Jan 14 1965 *Contacted Mr. Kinsey to see if he had made up his mind about the job in NY as I had sent one else to refer. He advised me that he was being considered for position as security officer with the Republican National Committee and he would know after they met in Chicago Jan 22/*

1/2/65 *= hear from him personally - do for subject himself he was trying private inquiry.*

3-62

OUT PLACEMENT INTERVIEW RECORD

S-E-C-R-E-T

(See Reverse)

65-5115-2-182

S-E-C-R-E-T
(When Filled In)

| S-E-C-R-E-T
(When Filled In) | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|--------------------|-----|-----|-----|------|----------------|
| NAME | Title, Grade & Salary | Office & Extension | DOB | POB | LMD | Type | Referral |
| Reference Data | | | | | | | GP Interviewer |
| Date of Interview | Details of Out Placement (Including Cover & Security Data) | | | | | | |
| <div style="height: 400px;"></div> | | | | | | | |
| <div style="text-align: center;">OUT PLACEMENT INTERVIEW RECORD</div> <div style="text-align: right;">(See Reverse)</div> | | | | | | | |

S-E-C-R-E-T
(When Filled In)

| NAME | | Title, Grade & Salary | | Office & Extension | DOS | REL | LMD | CP Interviewer |
|--------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|-------|----------------------------|-----|----------------------------|
| Kinsley, Herman E. | | Secretary 13 | | TSB/ENB
X 2009 | 12/16 | 12/16 | | CP Interviewer |
| Reference Data | | Location
T.O. 1-200 Analyst | | Date of Birth
12/16 | | Date of Interview
12/16 | | CP Interviewer
P. C. C. |
| Date of Interview | | Details of Out Placement (Including Cover & Security Data) | | | | | | |
| 22 March 67 | | Saw both + Clarkdale. Think there is a good chance of his retention. Also good background in from background, etc. and etc. He is the same as he is. Knows the area at 200. Has contact at USA. Lives at Allen Town. Also draft of a statement + security report. | | | | | | |
| 26 July 67 | | Did not see this man - he slipped out before we could catch him. mms | | | | | | |

SECRET

| NOTIFICATION OF ESTABLISHMENT
OF MILITARY COVER BACKSTOP | | DATE
25 January 1962 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------------|
| TO:
(check) | <input checked="" type="checkbox"/> CHIEF, PERSONNEL AND SERVICE DIVISION | ZIMSEY, Herman E.
K-8689
IS 1450-001 |
| | <input type="checkbox"/> CHIEF, OPERATING COMMAND | |
| ATTN: | | |
| REF: | | |
| MILITARY COVER BACKSTOP ESTABLISHED | | |
| <input checked="" type="checkbox"/> BLOCK RECORDS:
(CHH 20-800-11)
a. TEMPORARILY FOR <u>30</u> DAYS, EFFECTIVE <u>19 January 1962</u>
b. CONTINUING, EFFECTIVE _____ | | |
| <input type="checkbox"/> SUBMIT FORM 602 TO CHANGE LIMITATION CATEGORY TO 2.
(CHH 20-800-2) | | |
| <input type="checkbox"/> ASCERTAIN THAT ARMY W-2 BEING ISSUED.
(CHH 20-800-3) | | |
| <input type="checkbox"/> SUBMIT FORM 1202 FOR ANY CHANGE AFFECTING THIS COVER.
(R 240-250) | | |
| <input type="checkbox"/> SUBMIT FORM 1304 FOR TRANSFERRING COVER RESPONSIBILITY.
(R 240-250) | | |
| <input type="checkbox"/> REMARKS: | | |
| <p style="text-align: center;"> </p> | | |
| 1. COPIES TO 1450-001 | | |
| DISTRIBUTION: 1. 1450-001 1. 1450-001 1. 1450-001 | | |

FORM 1551 (1-62)

SECRET

115-20-431

| | | | | | | | | | |
|------------------------------------------------------------------------------------------------------|--|-----------------|--|-------------------|--|----------|--|--------------|--|
| 1. EMP. SERIAL NO. | | 2. NAME | | 3. ASSIGNED ORGN. | | 4. FUNDS | | 5. ALLOTMENT | |
| GS 13 | | KIMSEY HERMAN E | | DUP/TSS | | V-20 | | | |
| 6. CHECK ONE <input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP | | | | | | | | | |
| 7. NUMBER OF HOURS LWOP | | | | | | | | | |
| 8. INITIALS OF CLERK | | | | | | | | | |
| 9. AUDITED BY | | | | | | | | | |
| 10. TYPE OF ACTION | | | | | | | | | |
| 11. REMARKS | | | | | | | | | |
| 12. AUTHENTICATION | | | | | | | | | |

REMARKS AND AUTHENTICATION:

/ / NO EXCESS LWOP

/ / IN PAY STATUS AT END OF WAITING PERIOD

/ / IN LWOP STATUS AT END OF WAITING PERIOD

PAY CHANGE NOTIFICATION

Form 560

Obsolete Previous Edition

SECRET

(4-51)

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-568 AND DCI MEMO DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

| SD | NAME | SERIAL | ORGN | GR-ST | OLD SALARY | NEW SALARY |
|----|-----------------|--------|-------|---------|------------|------------|
| D | KIMSEY HERMAN E | 161555 | 44 49 | GS-13 3 | \$10,370 | \$11,155 |

/S/ ENMETT D. ECHOLS


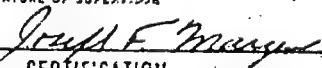
DIRECTOR OF PERSONNEL

SECRET
(WHEN FILLED IN)

| | | | | | | | | | | | |
|------------------------------------------------------------------------------------------------------|------|-----------------|---------------------|-------------------|--------------------|-------------------------|------|--------------|----------------|----|-----|
| 1. EMP. SERIAL NO. | | 2. NAME | | 3. ASSIGNED ORGN. | | 4. FUNDS | | 5. ALLOTMENT | | | |
| 161555 | | KIMSEY HERMAN E | | DUP/TSS | | V-20 | | | | | |
| 6. OLD SALARY RATE | | | | | 7. NEW SALARY RATE | | | | | | |
| GRADE | STEP | SALARY | LAST EFFECTIVE DATE | | | GRADE | STEP | SALARY | EFFECTIVE DATE | | |
| | | | MO | DA | YR. | | | | MO | DA | YR. |
| GS 13 | 2 | \$10,130 | 08 | 10 | 58 | GS 13 | 3 | \$10,370 | 02 | 07 | 60 |
| TO BE COMPLETED BY THE OFFICE OF COMPTROLLER | | | | | | | | | | | |
| 8. CHECK ONE <input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP | | | | | | 9. NUMBER OF HOURS LWOP | | | | | |
| IF EXCESS LWOP, CHECK FOLLOWING: | | | | | | 10. INITIALS OF CLERK | | | | | |
| <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD | | | | | | 11. AUDITED BY | | | | | |
| <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD | | | | | | | | | | | |
| TO BE COMPLETED BY THE OFFICE OF PERSONNEL | | | | | | | | | | | |
| 12. TYPE OF ACTION | | | | | | 13. REMARKS | | | | | |
| <input type="checkbox"/> P.A. <input type="checkbox"/> S.A. <input type="checkbox"/> PAY ADJUSTMENT | | | | | | | | | | | |
| 14. AUTHENTICATION | | | | | | | | | | | |

PAY CHANGE NOTIFICATION

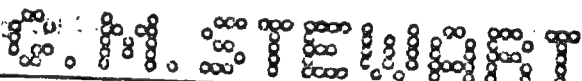
SECRET
(WHEN FILLED IN)

| 1 EMP SERIAL NO | | 2 NAME | | 3 ASSIGNED ORGAN | | 4 FUND | | 5 ALLOCATION | | | |
|-----------------------------------------------------------------------------------------------------------------------------|------|-----------------|---------------------|------------------|----|------------------------------------------------------------------------------------|------|--------------|----------------|----|----|
| 161555 | | KINSEY HERMAN E | | DDP/ISS 6 | | V-20 | | | | | |
| 6. OLD SALARY RATE | | | | | | 7. NEW SALARY RATE | | | | | |
| GRADE | STEP | SALARY | LAST EFFECTIVE DATE | | | GRADE | STEP | SALARY | EFFECTIVE DATE | | |
| | | | MO | DA | YR | | | | MO | DA | YR |
| GS 13 | 1 | \$ 9,890 | 02 | 10 | 57 | GS 13 | 2 | \$10,130 | 05 | 10 | 58 |
| REMARKS | | | | | | | | | | | |
| <div style="text-align: right;">  </div> | | | | | | | | | | | |
| CERTIFICATION | | | | | | | | | | | |
| I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY. | | | | | | | | | | | |
| TYPED, OR PRINTED, NAME OF SUPERVISOR | | | | DATE | | SIGNATURE OF SUPERVISOR | | | | | |
| JOSEPH F. MARZEN | | | | 10/7/58 | |  | | | | | |
| PERIODIC STEP INCREASE - CERTIFICATION | | | | | | | | | | | |

SECRET

PERSONNEL FOLDER

SECRET
(WHEN FILLED IN)

| 1. EMP. SERIAL NO. | | 2. NAME | | 3. ASSIGNED ORGAN. | | 4. FUNDS | | 5. ALLOTMENT | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-----------------|---------------------|--------------------|-----|------------------------------------------------|------|--------------|----------------|-----|-----|
| 161555 | | KIMSEY HERMAN E | | DDP/TSS | | V-20 | | | | | |
| 6. OLD SALARY RATE | | | | | | 7. NEW SALARY RATE | | | | | |
| GRADE | STEP | SALARY | LAST EFFECTIVE DATE | | | GRADE | STEP | SALARY | EFFECTIVE DATE | | |
| | | | MO. | DA. | YR. | | | | MO. | DA. | YR. |
| GS 13 | 1 | \$ 9,690 | 02 | 10 | 57 | GS 13 | 2 | \$10,130 | 08 | 10 | 58 |
| TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER | | | | | | | | | | | |
| 8. CHECK ONE <input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP | | | | | | 9. NUMBER OF HOURS LWOP | | | | | |
| IF EXCESS LWOP, CHECK FOLLOWING:
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD | | | | | | 10. INITIALS OF CLEER <i>HH</i> 11. AUDITED BY | | | | | |
| <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD | | | | | | | | | | | |
| TO BE COMPLETED BY THE OFFICE OF PERSONNEL | | | | | | | | | | | |
| 12. PROJECTED SALARY RATE AND EFFECTIVE DATE | | | | | | 13. REMARKS | | | | | |
| GRADE | STEP | SALARY | MO. | DA. | YR. | | | | | | |
| | | | | | | | | | | | |
| 14. AUTHENTICATION | | | | | | | | | | | |
| <div style="text-align: center;"> 
 J. H. STEWART
 PERIODIC STEP INCREASE - AUTHENTICATION </div> | | | | | | | | | | | |

SECRET

PERSONNEL FOLDER

S E C R E T

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE
 12 JANUARY 1958 AUTHORIZED BY P. L. 85, - 462 AND DCI
 DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

| NAME | SERIAL | GRADE-STEP | OLD SALARY | NEW SALARY |
|-----------------|--------|------------|------------|------------|
| KIMSEY HERMAN E | 161555 | GS-13-1 | \$ 8,990 | \$ 9,890 |

GORDON M. STEWART
 /S/ DIRECTOR OF PERSONNEL

S E C R E T

ARMA: 20 SEP 62

SECRET
(When Filled In)

| NOTIFICATION OF PERSONNEL ACTION | | | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------|-------------------------|--------------------------------------|----------------------------------|--------------------------------------|--------------------------------|----------------------------------|--|
| 1. SERIAL NUMBER | | 2. NAME (LAST FIRST MIDDLE) | | | | | | | |
| 061555 | | KIMSEY HERMAN E | | | | | | | |
| 3. NATURE OF PERSONNEL ACTION | | | | | 4. EFFECTIVE DATE | | 5. CATEGORY OF EMPLOYMENT | | |
| TERMINATION | | | | | 09 20 62 | | REGULAR | | |
| 6. FUNDS | | X | | Y TO Y | | Y TO EF | | 7. COST CENTER NO. CHARGEABLE | |
| | | EF TO Y | | EF TO EF | | 3276 1064 1000 | | 8. CSC OR OTHER LEGAL AUTHORITY | |
| 9. ORGANIZATIONAL DESIGNATIONS | | | | | 10. LOCATION OF OFFICIAL STATION | | | | |
| DDP TSD
AUTHENTICATION
GRAPHIC ARTS REPRODUCTION BRANCH
ANALYSIS AND RESEARCH SECTION | | | | | WASH., D. C. | | | | |
| 11. POSITION TITLE | | | | | 12. POSITION NUMBER | | 13. CAREER SERVICE DESIGNATION | | |
| DOCUMENT TECH CH | | | | | 0658 | | D | | |
| 14. CLASSIFICATION SCHEDULE (GS, AB, etc.) | | | 15. OCCUPATIONAL SERIES | | 16. GRADE AND STEP | | 17. SALARY OR RATE | | |
| GS | | | 1397.01 | | 13 4 | | 11415 | | |
| 18. REMARKS | | | | | | | | | |
| <p>TERMINATED IN ACCORDANCE WITH PROVISIONS OF CIA REGULATION 20-27, SEPARATION OF SURPLUS PERSONNEL, PURSUANT TO AUTHORITY OF DIRECTOR OF CENTRAL INTELLIGENCE CONTAINED IN SECTION 102 (C) OF THE NATIONAL SECURITY ACT OF 1947, AS AMENDED. THIS TERMINATION DOES NOT AFFECT YOUR RIGHT TO SEEK OR ACCEPT EMPLOYMENT IN ANY OTHER DEPARTMENT OR AGENCY OF THE U.S. GOVERNMENT IF YOU ARE DECLARED ELIGIBLE FOR SUCH EMPLOYMENT BY THE U.S. CIVIL SERVICE COMMISSION.</p> <p>SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL</p> | | | | | | | | | |
| 19. ACTION CODE | | 20. EMPLOY CODE | | 21. OFFICE CODING | | 22. STATION CODE | | 23. INTERFERE CODE | |
| 45 | | 10 | | NUMERIC ALPHABETIC | | | | | |
| 24. HRT EXPIRES | | 25. SPECIAL REFERENCE | | 26. RETIREMENT DATA | | 27. SEPARATION DATA CODE | | 28. CORRECTION/CANCELLATION DATA | |
| NO. DA | | | | 1. CS
2. RICA
3. NONE | | 1GT0003 | | MO DA YR | |
| 29. VET. PREFERENCE | | 30. SERV. COMP. DATE | | 31. LONG COMP. DATE | | 32. CAREER CATEGORY | | 33. FEGLI / HEALTH INSURANCE | |
| CODE | | MO DA YR | | MO DA YR | | CODE | | CODE U. WAIVER HEALTH INS. CODE | |
| 41. PREVIOUS GOVERNMENT SERVICE DATA | | 42. LEAVE CAT. | | 43. FEDERAL TAX DATA | | 44. STATE TAX DATA | | 45. SOCIAL SECURITY NO. | |
| CODE | | CODE | | FORM RECUTED CODE NO. TAX EXEMPTIONS | | FORM RECUTED CODE NO. TAX EXEMPTIONS | | CODE NO. TAX STATE CODE | |
| 1. NO. PREVIOUS SERVICE
2. NO. BREAK IN SERVICE (LESS THAN 3 YRS.)
3. BREAK IN SERVICE (MORE THAN 3 YRS.) | | | | 1. YES
2. NO | | 1. YES
2. NO | | | |
| SIGNATURE OR OTHER AUTHENTICATION | | | | | | | | | |
| <p>AUTHORIZED MAXIMUM SEPARATION COMPENSATION IN ACCORDANCE WITH THE PROVISIONS OF CIA REGULATION 20-32, SEPARATION COMPENSATION</p> <p>POSTED</p> <p>10-3 6-2 Luv</p> | | | | | | | | | |

FORM
4-62

1150

Use Previous
Edition

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

SECRET
(When Filled In)

NEWS: 13 MAY 1960

NOTIFICATION OF PERSONNEL ACTION

| | | | | | |
|-------------------------|-----------------------------|---------------------------------|----------------------------|-----------------------------|-----------------------------|
| 1. Serial No. | 2. Name (Last-First-Middle) | 3. Date Of Birth | 4. Vac. Prog. | 5. Sex | 6. CS - EOD |
| 161555 | KINSEY HERMAN E | Mo. Da. Yr.
12 11 16 | Non-a
5 Pt-1
10 Pt-2 | Code
1
M 1 | Mo. Da. Yr.
03 23 53 |
| 7. SSN | 8. CSC Releas | 9. CSC Or Other Legal Authority | 10. Asst. Allidv. | 11. H.C.U. | 12. LCD |
| Mo. Da. Yr.
03 10 42 | Yos-1
No-2
Code
1 | 50 USCA 403 J | Mo. Da. Yr.
03 23 53 | Yos-1
No-2
Code
03 | Yos-1
No-2
Code
03 |

PREVIOUS ASSIGNMENT

| | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------|--|--------------------------------------------------|--|--------------------------------------------|--|
| 14. Organizational Designations
DOF - TSS
AUTHENTICATION
GRAPHIC ARTS REPRODUCTION DIV
ANALYSIS AND RESEARCH BRANCH | | Code | | 15. Location Of Official Station
WASH., D. C. | | Station Code | |
| 16. Desc. Field
Dent - 5
USHD - 6
Frgn - 5 | | 17. Position Title
Code
IO TECH AIDS | | 18. Position No.
0092 | | 19. Serv. 20. Occup. Series
GS 0136.63 | |
| 21. Grade & Step
13 3 | | 22. Salary Or Rate
\$10370 | | 23. SD
D | | 24. Date CY Grade
Mo. Ds. Yr. | |
| | | | | 25. Pst Due
Mo. Ds. Yr. | | 26. Appropriation Number
0225 1005 1000 | |

ACTION

| ACTION | | | | | |
|----------------------|------|------------------------------|----------------------|------|---------------------|
| 27. Nature Of Action | Code | 28. Eff. Date
Mo. Da. Yr. | 29. Type Of Employee | Code | 30. Separation Data |
| REASSIGNMENT | 56 | 05 15 60 | REGULAR | 01 | |

PRESENT ASSIGNMENT

| | | | | | | | |
|-------------------------------------------------------------------------------------|--|----------------------------------------|--|----------------------------------------|--|----------------------------------------------|--|
| 31. Organizational Designations
DOP 152 | | Code | | 32. Location Of Official Station | | Station Code | |
| AUTHENTICATION
GRAPHIC ARTS REPRODUCTION BRANCH
ANALYSIS AND RESEARCH SECTION | | 4449 | | WASH., D. C. | | 75013 | |
| 33. Date - Field
Dept - 2 Code
USHD - 4
Frgn - 5 12 | | 34. Position Title
DOCUMENT TECH CH | | 35. Position No.
0658 | | 36. Serv. 37. Occup. Series
GS 1397.01 | |
| 38. Grade & Step
13 3 | | 39. Salary Or Rate
\$10370 | | 40. SD
D | | 41. Date Of Grade
Mo. Da. Yr.
02 10 57 | |
| | | | | 42. Pst Dtd
Mo. Da. Yr.
03 06 61 | | 43. Appropriation Number
0225 1005 1000 | |
| 44. Remarks | | | | | | | |

FORM NO 1150
1 MAR 57

~~SECRET~~

(4)

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

are

| | | | | |
|-------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------|-------------------------------------------------------------------|-----------------------------------|
| 1. NAME (Last, first, middle initial, and surname)
MR. HIRSH E. KIRBY | | 2. DATE OF BIRTH
11 Dec 1916 | 3. JOURNAL OR ACTION NO. | 4. DATE
4 February 1957 |
| This is to notify you of the following action affecting your employment: | | | | |
| 5. NATURE OF ACTION (Use Standard Terminology)
PROMOTION | | 6. EFFECTIVE DATE
10 Feb 1957 | 7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
50 USCA 403 J | |
| FROM | | TO | | |
| 8. POSITION TITLE
GS-0136.63-12 \$7735.00 per annum | | 9. SERVICE, SERIES, GRADE, SALARY
GS-0136.63-13 \$9790.00 per annum | | |
| 10. ORGANIZATIONAL DESIGNATIONS
444952 | | 11. HEADQUARTERS
2 | | |
| 12. FIELD OR DEPT'L
DEPARTMENTAL | | 13. FIELD OR DEPT'L
DEPARTMENTAL | | |
| 14. POSITION CLASSIFICATION ACTION
SD-OT | | 15. LEGAL RESIDENCE
CLAIMED | | |
| 16. APPROPRIATION
FROM 7-2715-20 TO 750-13 | | 17. SUBJECT TO C. S. RETIREMENT ACT (YES OR NO)
Yes | | |
| 18. DATE OF APPOINTMENT AFFIDAVIT (EXCEPTIONS ONLY) | | 19. STATE | | |
| 20. REMARKS:

3 EOD 03/23/53

POSTED
1 FEB 1957 | | | | |
| ENTRANCE PERFORMANCE RATING:
Director of Personnel | | | | |
| 4. PERSONNEL FOLDER COPY | | | | |

713 2/1/57

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

THREE

| | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------|--|----------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------|--|
| 1. NAME (MR., MISS, MRS., OR MISS) LAST, FIRST, MIDDLE INITIALS AND SURNAMES
Mr. Herman E. Kinsey | | 2. DATE OF BIRTH
11 Dec 1916 | | 3. JOURNAL OR ACTION NO. | | 4. DATE
17 Jun 1955 | |
| This is to notify you of the following action affecting your employment: | | | | | | | |
| 5. NATURE OF ACTION (SEE STANDARD TERMINOLOGY)
Promotion | | | | 6. EFFECTIVE DATE
19 June 1955 | | 7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
50 FACA 403-J | |
| FROM | | | | TO | | | |
| NY-92-11

GS-0136.63-11 \$5910.00 per annum | | | | NY-92

GS-0136.63-12 \$7040.00 per annum | | | |
| 8. POSITION TITLE | | | | 10 (Tech Aids) | | | |
| 9. SERVICE, SERIES, GRADE, SALARY | | | | DDP/Technical Services Staff
Authentication
Graphic Arts Reproduction Division
Analysis and Research Branch | | | |
| 10. ORGANIZATIONAL DESIGNATIONS | | | | Washington, D. C. | | | |
| 11. HEADQUARTERS | | | | | | | |
| 12. FIELD OR DEPT'L | | | | FIELD <input type="checkbox"/> DEPARTMENTAL <input checked="" type="checkbox"/> | | | |
| 13. VETERAN'S PREFERENCE | | | | 14. POSITION CLASSIFICATION ACTION | | | |
| 15. 16. 17. APPROPRIATION
FROM: 5-7515-20
TO: 0000 | | | | 18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)
Yes | | | |
| 19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) | | | | 20. LEGAL RESIDENCE
<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
STATE: Calif. | | | |
| 21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements. | | | | | | | |
| <div style="border: 1px solid black; padding: 10px; display: inline-block;"> <p>6/22/55 GE</p> </div> | | | | | | | |

ENTRANCE PERFORMANCE: 20/52
 Director of Personnel

4. PERSONNEL FOLDER COPY

U. S. GOVERNMENT PRINTING OFFICE: 1953-015728

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

| | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|------------------------|
| 1. NAME (LAST, FIRST-MIDDLE, OTHER NAME, INITIALS AND SURNAMES)
MR. DONALD E. LEE | | 2. DATE OF ACTION
11 Dec 1955 | 3. JOURNAL ACTION NO.
17 | 4. DATE
17 Dec 1955 |
| This is to notify you of the following action affecting your employment: | | | | |
| 5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)
REASSIGNMENT | | 6. EFFECTIVE DATE
22 May 1955 | 7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
50 USC 103 J | |
| FROM
TO (CIVIL ACTION) BY 92-11 | | TO
TO (CIVIL ACTION) BY 92-11 | | |
| 8. POSITION TITLE | | 9. SERVICE, SERIES, GRADE, SALARY
GS-13-11 \$5264.00 p/n | | |
| 10. ORGANIZATIONAL DESIGNATIONS | | 11. HEADQUARTERS
Washington, D. C. | | |
| 12. FIELD OR DEPT'L
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL | | 13. VETERAN'S PREFERENCE
NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> S. P. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB. <input type="checkbox"/> OTHER <input type="checkbox"/> | | |
| 14. POSITION CLASSIFICATION ACTION
NEW <input type="checkbox"/> PROM <input type="checkbox"/> TRANS <input type="checkbox"/> REGR <input type="checkbox"/> | | 15. DATE OF APPOINTMENT
10-1-55 | | |
| 16. SUBJECTING OFFICE
10-1-55 | | 17. DATE OF APPOINTMENT
10-1-55 | | |
| 18. DATE OF APPOINTMENT
10-1-55 | | 19. LEGAL RESIDENCE
<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
STATE: D.C. | | |
| 20. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements. | | | | |
| <div style="text-align: center;"> <p>RECEIVED</p> <p>10 MAY 1955</p> <p>88</p> </div> | | | | |
| ENTRANCE PERFORMANCE RATING: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 | | | | |

4. PERSONNEL FOLDER COPY

ALL 5/18/55

NOTIFICATION OF PERSONNEL ACTION

4. PERSONNEL FOLDER COPY

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

Jan

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-----------------------------------------------------|
| 1. NAME (MR. MISS - MRS. - ONE GIVEN NAME, INITIALS AND SURNAME)
Mr. Herman E. Kisco | | 2. DATE OF BIRTH
11 Dec 1916 | 3. JOURNAL OR ACTION NO. | 4. DATE
7 May 1954 |
| This is to notify you of the following action affecting your employment: | | | | |
| 5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)
Promotion | | 6. EFFECTIVE DATE
9 May 1954 | 7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
50 USCA 403 j | |
| FROM
IX 93-9
GS-1390.01-9 \$5185.00 per annum | | TO
Technologist BY 93
GS-1390.01-11 \$5940.00 per annum | | |
| 9. SERVICE, SERIES, GRADE, SALARY | | 10. ORGANIZATIONAL DESIGNATIONS
ISF/Technical Services Staff
Graphic Arts Reproduction Div.
Analysis & Research Branch | | |
| 11. HEADQUARTERS
Washington, D. C. | | 12. FIELD OR DEPTL
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL | | |
| 13. VETERAN'S PREFERENCE
NONE <input type="checkbox"/> OTHER <input type="checkbox"/> SPT. <input type="checkbox"/> 10-POINT <input type="checkbox"/>
DISAB <input type="checkbox"/> OTHER <input type="checkbox"/> | | 14. POSITION CLASSIFICATION ACTION
NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> TEN. <input type="checkbox"/>
SP-PT
CD-15 | | |
| 15. SEX
<input checked="" type="checkbox"/> M <input type="checkbox"/> F | 16. RACE
<input checked="" type="checkbox"/> W <input type="checkbox"/> O | 17. APPROPRIATION
FROM: 4-2515-20
TO: Same | 18. SUBJECT TO U.S. RETIREMENT ACT (YES - NO)
No | 19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) |
| 20. LEGAL RESIDENCE
<input type="checkbox"/> CLAIMED <input checked="" type="checkbox"/> PROVED
STATE: Calif. | | 21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements. | | |

ENTRANCE PERFORMANCE RATING

Deputy Assistant Director for Personnel

4. PERSONNEL FOLDER COPY

U. S. GOVERNMENT PRINTING OFFICE: 1953 240722

STANDARD FORM 50
REV. APRIL 1961
PROMULGATED BY
U. S. CIVIL SERVICE COMMISSION
CHAPTER 81, FEDERAL PERSONNEL MANUAL

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

| | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| 1. NAME (MR - MISS - MRS - ONE GIVEN NAME, INITIALS, AND SURNAME)
Mr. Hanson E. Kinney | | 2. DATE OF BIRTH
11 Dec. 1916 | 3. JOURNAL OR ACTION NO. & DATE
20 Apr. 1954 |
| This is to notify you of the following action affecting your employment: | | | |
| 3. NATURE OF ACTION (USE STANDARD TERMINOLOGY)
Reassignment | | 4. EFFECTIVE DATE
25 Apr. 1954 | 5. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
50 USCA 403 J |
| FROM
Tech Projects Of NY 256-9

GS-1390-9

Office of the Chief | | TO
Technologist NY 93-9

GS-1390.01-9 \$5125.00 per annum

DDP/TSS
Graphic Arts Reproduction Div.
Analysis & Research Branch

Washington, D. C. | |
| <input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL | | <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL | |
| 11. VETERAN'S PREFERENCE
NONE <input type="checkbox"/> WWII <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/>
DISAB <input type="checkbox"/> OTHER <input type="checkbox"/> | | 12. POSITION CLASSIFICATION ACTION
NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REM. <input type="checkbox"/>
CD-75 | |
| 15. SEX <input type="checkbox"/> M <input type="checkbox"/> F | 16. RACE <input type="checkbox"/> W <input type="checkbox"/> N <input type="checkbox"/> O | 17. APPROPRIATION
FROM: 4-2515-20
TO: 5-2515-20 | 18. SUBJECT TO C.S. RETIREMENT ACT (YES - NO)
Yes |
| 19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY) | | 20. LEGAL RESIDENCE
<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
STATE: Calif. | |
| 21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements. | | | |
| ENTRANCE PERFORMANCE RATING: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 <input type="checkbox"/> 21 <input type="checkbox"/> 22 <input type="checkbox"/> 23 <input type="checkbox"/> 24 <input type="checkbox"/> 25 <input type="checkbox"/> 26 <input type="checkbox"/> 27 <input type="checkbox"/> 28 <input type="checkbox"/> 29 <input type="checkbox"/> 30 <input type="checkbox"/> 31 <input type="checkbox"/> 32 <input type="checkbox"/> 33 <input type="checkbox"/> 34 <input type="checkbox"/> 35 <input type="checkbox"/> 36 <input type="checkbox"/> 37 <input type="checkbox"/> 38 <input type="checkbox"/> 39 <input type="checkbox"/> 40 <input type="checkbox"/> 41 <input type="checkbox"/> 42 <input type="checkbox"/> 43 <input type="checkbox"/> 44 <input type="checkbox"/> 45 <input type="checkbox"/> 46 <input type="checkbox"/> 47 <input type="checkbox"/> 48 <input type="checkbox"/> 49 <input type="checkbox"/> 50 <input type="checkbox"/> 51 <input type="checkbox"/> 52 <input type="checkbox"/> 53 <input type="checkbox"/> 54 <input type="checkbox"/> 55 <input type="checkbox"/> 56 <input type="checkbox"/> 57 <input type="checkbox"/> 58 <input type="checkbox"/> 59 <input type="checkbox"/> 60 <input type="checkbox"/> 61 <input type="checkbox"/> 62 <input type="checkbox"/> 63 <input type="checkbox"/> 64 <input type="checkbox"/> 65 <input type="checkbox"/> 66 <input type="checkbox"/> 67 <input type="checkbox"/> 68 <input type="checkbox"/> 69 <input type="checkbox"/> 70 <input type="checkbox"/> 71 <input type="checkbox"/> 72 <input type="checkbox"/> 73 <input type="checkbox"/> 74 <input type="checkbox"/> 75 <input type="checkbox"/> 76 <input type="checkbox"/> 77 <input type="checkbox"/> 78 <input type="checkbox"/> 79 <input type="checkbox"/> 80 <input type="checkbox"/> 81 <input type="checkbox"/> 82 <input type="checkbox"/> 83 <input type="checkbox"/> 84 <input type="checkbox"/> 85 <input type="checkbox"/> 86 <input type="checkbox"/> 87 <input type="checkbox"/> 88 <input type="checkbox"/> 89 <input type="checkbox"/> 90 <input type="checkbox"/> 91 <input type="checkbox"/> 92 <input type="checkbox"/> 93 <input type="checkbox"/> 94 <input type="checkbox"/> 95 <input type="checkbox"/> 96 <input type="checkbox"/> 97 <input type="checkbox"/> 98 <input type="checkbox"/> 99 <input type="checkbox"/> 100 | | | |
| Deputy Assistant Director for Personnel | | | |

4. PERSONNEL FOLDER COPY

U. S. GOVERNMENT PRINTING OFFICE: 1943 - 249347

| | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|-----------------------------------------|-----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------|---------|
| 1. Agency and organizational designations | | 2. Pay rate | | 3. Effective date
6-15-53
4-22-53 | | 4. Slip No. | |
| 5. Employee's name (and social security account number when appropriate)
KIMBY, Herman E. | | 6. Gross pay
\$5060.00 | | | | | |
| PAY ROLL CHANGE DATA | | | | | | | |
| | BASE PAY | OVERTIME | | GROSS PAY | FED. TAX | F. I. C. A. | NET PAY |
| 7. Previous period | | | | | | | |
| 8. New period | | | | | | | |
| 9. Pay this period | | | | | | | |
| 10. Remarks | | | | 11. Appropriation(s)
DDP/T3B 5 | | 12. Prepared by
dgs 9 Apr 54 | |
| | | | | | | 13. Audited by | |
| <input checked="" type="checkbox"/> Periodic step increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step increase | | | | | | | |
| 14. Effective date
23 Mar 54 | 15. Grade last equivalent increase
23 Mar 53 | 16. Old salary rate
\$5060.00 | 17. New salary rate
\$5185.00 | 18. Performance rating is satisfactory or better. | | | |
| 19. LWOP date (fill in appropriate spaces covering LWOP during following periods): | | | | <input type="checkbox"/> No excess LWOP. Total excess LWOP _____
(Check applicable box in case of excess LWOP)
<input type="checkbox"/> Excess LWOP during period _____
<input type="checkbox"/> Excess LWOP during period _____
<input type="checkbox"/> Excess LWOP during period _____ | | | |
| STANDARD FORM NO. 1126d—Revised
Form prescribed by Comp. Gen., 11-5
Nov. 3, 1952, General Regulations No. 167 | | | | | | | |

PAY ROLL CHANGE SLIP—PERSONNEL COPY

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION 2

| | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------|--|
| 1. NAME (MR - MRS - MISS - ONE GIVEN NAME, INITIALS, AND SURNAME) | | 2. DATE OF BIRTH | | 3. JOURNAL OR ACTION NO. | | 4. DATE | |
| Mr. Eberhan E. Kinsey | | 11 Dec. 1916 | | | | 29 Aug. 1953 | |
| This is to certify you of the following action affecting your employment: | | | | | | | |
| 5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) | | 6. EFFECTIVE DATE | | 7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY | | | |
| Reassignment | | EOB | | 13 Sept. 1953 Schedule A6.116(b) | | | |
| FROM | | | | TO | | | |
| 8. POSITION TITLE | | | | 9. SERVICE, SERIES, GRADE, SALARY | | | |
| TECH PROJECTS OFF BY 256-9 | | | | TECH PROJECTS OFF BY 256-9 | | | |
| GS 1390-9 \$5060.00 per annum | | | | GS 1390-9 \$5060.00 per annum | | | |
| 10. ORGANIZATIONAL DESIGNATIONS | | | | DDP/TSS | | | |
| Graphic Arts Reproduction Div | | | | Graphic Arts Reproduction Div | | | |
| Office of the Chief | | | | Office of the Chief | | | |
| 11. HEADQUARTERS | | | | Washington D.C. | | | |
| Washington D.C. | | | | Washington D.C. | | | |
| 12. FIELD OR DEPT'L | | | | 13. FIELD | | 14. DEPARTMENTAL | |
| <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL | | <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL | | | | | |
| 15. VETERAN'S PREFERENCE | | | | 16. POSITION CLASSIFICATION ACTION | | | |
| NONE <input type="checkbox"/> WAR <input type="checkbox"/> OTHER <input type="checkbox"/> 17. POINT | | | | NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input type="checkbox"/> | | | |
| <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 <input type="checkbox"/> 21 <input type="checkbox"/> 22 <input type="checkbox"/> 23 <input type="checkbox"/> 24 <input type="checkbox"/> 25 <input type="checkbox"/> 26 <input type="checkbox"/> 27 <input type="checkbox"/> 28 <input type="checkbox"/> 29 <input type="checkbox"/> 30 <input type="checkbox"/> 31 <input type="checkbox"/> 32 <input type="checkbox"/> 33 <input type="checkbox"/> 34 <input type="checkbox"/> 35 <input type="checkbox"/> 36 <input type="checkbox"/> 37 <input type="checkbox"/> 38 <input type="checkbox"/> 39 <input type="checkbox"/> 40 <input type="checkbox"/> 41 <input type="checkbox"/> 42 <input type="checkbox"/> 43 <input type="checkbox"/> 44 <input type="checkbox"/> 45 <input type="checkbox"/> 46 <input type="checkbox"/> 47 <input type="checkbox"/> 48 <input type="checkbox"/> 49 <input type="checkbox"/> 50 <input type="checkbox"/> 51 <input type="checkbox"/> 52 <input type="checkbox"/> 53 <input type="checkbox"/> 54 <input type="checkbox"/> 55 <input type="checkbox"/> 56 <input type="checkbox"/> 57 <input type="checkbox"/> 58 <input type="checkbox"/> 59 <input type="checkbox"/> 60 <input type="checkbox"/> 61 <input type="checkbox"/> 62 <input type="checkbox"/> 63 <input type="checkbox"/> 64 <input type="checkbox"/> 65 <input type="checkbox"/> 66 <input type="checkbox"/> 67 <input type="checkbox"/> 68 <input type="checkbox"/> 69 <input type="checkbox"/> 70 <input type="checkbox"/> 71 <input type="checkbox"/> 72 <input type="checkbox"/> 73 <input type="checkbox"/> 74 <input type="checkbox"/> 75 <input type="checkbox"/> 76 <input type="checkbox"/> 77 <input type="checkbox"/> 78 <input type="checkbox"/> 79 <input type="checkbox"/> 80 <input type="checkbox"/> 81 <input type="checkbox"/> 82 <input type="checkbox"/> 83 <input type="checkbox"/> 84 <input type="checkbox"/> 85 <input type="checkbox"/> 86 <input type="checkbox"/> 87 <input type="checkbox"/> 88 <input type="checkbox"/> 89 <input type="checkbox"/> 90 <input type="checkbox"/> 91 <input type="checkbox"/> 92 <input type="checkbox"/> 93 <input type="checkbox"/> 94 <input type="checkbox"/> 95 <input type="checkbox"/> 96 <input type="checkbox"/> 97 <input type="checkbox"/> 98 <input type="checkbox"/> 99 <input type="checkbox"/> 100 | | | | 18. DATE OF APPOINTMENT (MONTH AND DAY) | | 19. LEGAL RESERVE | |
| SEX <input type="checkbox"/> M <input type="checkbox"/> F | | 17. APPROXIMATE | | 18. SUBJECT TO C.S. RETIREMENT ACT (YES OR NO) | | 19. DATE OF APPOINTMENT (MONTH AND DAY) | |
| M <input type="checkbox"/> F <input type="checkbox"/> | | 1-2515-10 | | Yes | | 20. LEGAL RESERVE | |
| 1-2515-20 | | | | | | <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVIDED | |
| | | | | | | STATE | |
| 21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements. | | | | | | | |
| Transfer TO Vouchered Funds FROM Unvouchered Funds | | | | | | | |
| Acting Chief, Personnel, Division | | | | | | | |
| ENTRANCE PERFORMANCE RATING | | | | | | | |

Security Information

PERSONNEL FOLDER COPY

S-E-C-R-E-T
Security Information

COMB TO PERSONNEL ACTION

Page 35 of 35 pages.

6

(1) Staff or Division SSA (2) Date I/O Approved 7/1/77 (3) Effective date of Action 7/1/77

FROM

TO

| (1) NAME | (2) ORG. INF. & POS TITLE | (3) SCHEDULE SERIES-GRADE | (4) SLOT NO. | (5) ACTION | (6) ORG. INF. & POS TITLE | (7) SCHEDULE SERIES-GRADE | (8) SLOT NO. |
|--------------------------------------|---------------------------|---------------------------|--------------|------------|---------------------------------------|---------------------------|--------------|
| | | | I | | | | BY |
| DIVISION | | | | | | | |
| Special Assistance Division (Cont'd) | | | | | SPECIAL ASSISTANCE DIV. | | |
| <u>[REDACTED]</u> | Charist | GS-12 | 239 | B | Charist | GS-1320-12 | 193 |
| Laughinger, Frank W. | Charist | GS-7 | 242 | B | Charist | GS-1320-7 | 199 |
| <u>[REDACTED]</u> | Charist | GS-12 | 243 | B | Charist | GS-1320-12 | 202 |
| <u>[REDACTED]</u> | Trng Off-Tech Flds | GS-9 | 251 | C | TRAINING
Trng Off-Tech Flds | GS-1711-9 | 217 |
| * <u>[REDACTED]</u> , Vincent | Technician | GS-11 | 246 | B | SPECIAL ASSISTANCE DIV.
Technician | GS-101-11 | 206 |
| * <u>[REDACTED]</u> , Herman E. | Technician | GS-9 | 247 | B | GRAPHICS AIDS
Tech Projects Off | GS-101-9 | 120 200 |
| * Candidate in Process | | | | | | | |

(12) APPROVED BY:

(13) APPROVED BY:

(14) APPROVED BY:

for Staff or Div. Chief

S-E-C-R-E-T

Class. & Wage Division

Personnel Office

Security Information

SECRET

| CONFIDENTIAL FUNDS PERSONNEL ACTION | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| NAME: KINSLEY, Herman Edward | | DATE: 30 August 1952 | |
| NATURE OF ACTION: Excepted appointment | | EFFECTIVE DATE: 23 March 1953 | |
| TITLE | FROM | TO: TECH. PROT. OFF. BY-110
BRASS TECHNICIAN Y 247 | |
| GRADE AND SALARY | | GS-301-7 \$5060 | |
| OFFICE | | Technical Services | |
| DIVISION | | GRAPHIC ARTS R&P. DIV.
Special Assistance | |
| BRANCH | | Off. of Chief
Miscellaneous Techniques | |
| OFFICIAL STATION | | Washington D. C. | |
| QUALIFICATIONS | APPROVAL | EXECUTIVE | |
| CLASSIFICATION | PERSONNEL OFFICER | | |
| POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS | | YES <input type="checkbox"/> | NO <input checked="" type="checkbox"/> |
| DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON | | 23 March 1953 | |
| SECURITY CLEARED ON | | 6 Feb. 1953 | |
| OVERSEAS AGREEMENT SIGNED | | NA | |
| ENTERED ON DUTY | | 23 March 1953 | |
| <i>all</i>
25-15-10 | | <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div> <div style="text-align: center; font-size: small;">SIGNATURE OF AUTHENTICATING OFFICER</div> | |
| REMARKS:

<p style="text-align: center;">Subject is to be employed in a civilian capacity.</p> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 40%;"> <p>DOG: 03/23/53</p> <p>OSKED: 03/23/53</p> <p>LCD: 03/23/53</p> </div> <div style="width: 50%; text-align: right;"> <div style="border: 2px solid black; padding: 5px; display: inline-block;"> POSTED

 DE 26 Mar 53 </div> </div> </div> | | | |

FORM NO. 87-1
NOV 1949

SECRET

SECRET
(When Filled In)

EMPLOYEE SERIAL NUMBER

61555

FITNESS REPORT

SECTION A

GENERAL

| | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|----------|
| 1. NAME (Last) (First) (Middle) | 2. DATE OF BIRTH | 3. SEX | 4. GRADE |
| KIMBRY Herman E. | 11 December 1918 | M | GS-13 |
| 5. SERVICE DESIGNATION 6. OFFICIAL POSITION TITLE | 7. OFF/DIV/BR OF ASSIGNMENT | | |
| 2 DOC TECH CH | DDP/TS/DN/GARD | | |
| 8. CAREER STAFF STATUS | 9. TYPE OF REPORT | | |
| <input type="checkbox"/> NOT ELIGIBLE
<input checked="" type="checkbox"/> MEMBER
<input type="checkbox"/> DECLINED
<input type="checkbox"/> DENIED | <input type="checkbox"/> INITIAL
<input type="checkbox"/> REASSIGNMENT/SUPERVISOR
<input type="checkbox"/> ANNUAL
<input type="checkbox"/> REASSIGNMENT/EMPLOYEE | | |
| 10. DATE REPORT DUE IN O.P. | 11. REPORTING PERIOD From To | 12. SPECIAL (Specify) | |
| 31 January 1962 | 1 Dec 1960 - Dec 1961 | | |

SECTION B

EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

| | | | | | | |
|---------------------------------------------------------|---------------------|----------------|----------------------------------------------------------|---------------|--------------|-----------------|
| 1 - Unsatisfactory | 2 - Barely adequate | 3 - Acceptable | 4 - Competent | 5 - Excellent | 6 - Superior | 7 - Outstanding |
| SPECIFIC DUTY NO. 1 | | RATING NO. | SPECIFIC DUTY NO. 4 | | RATING NO. | |
| Supervises A&R Section activities. | | 3 | Oral Briefings. | | 5 | |
| SPECIFIC DUTY NO. 2 | | RATING NO. | SPECIFIC DUTY NO. 5 | | RATING NO. | |
| Questioned Document Analysis. | | 5 | Monitoring the writing of and writing technical reports. | | 5 | |
| SPECIFIC DUTY NO. 3 | | RATING NO. | SPECIFIC DUTY NO. 6 | | RATING NO. | |
| Liaison with other Government Questioned Document Labs. | | 5 | Monitors Graphology Program. | | 5 | |

SECTION C

EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.

- 1 - Performance in many important respects fails to meet requirements.
- 2 - Performance meets most requirements but is deficient in one or more important respects.
- 3 - Performance clearly meets basic requirements.
- 4 - Performance clearly exceeds basic requirements.
- 5 - Performance in every important respect is superior.
- 6 - Performance in every respect is outstanding.

| |
|------------|
| RATING NO. |
| 4 |

SECTION D

DESCRIPTION OF THE EMPLOYEE

In the rating boxes below, check (X) the degree to which each characteristic applies to the employee

| | | | | | | |
|-----------------------------------------------------------------|--------------------|-------------------|--------------------------|------------------------|---|---|
| 1 - Least possible degree | 2 - Limited degree | 3 - Normal degree | 4 - Above average degree | 5 - Outstanding degree | | |
| CHARACTERISTICS | | | | | | |
| NOT APPLICABLE | NOT OBSERVED | RATING | | | | |
| | | 1 | 2 | 3 | 4 | 5 |
| | | | | | X | |
| GETS THINGS DONE | | | | | | |
| RESOURCEFUL | | | | | X | |
| ACCEPTS RESPONSIBILITIES | | | | X | | |
| CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES | | | | | X | |
| DOES HIS JOB WITHOUT STRONG SUPPORT | | | | | X | |
| FACILITATES SMOOTH OPERATION OF HIS OFFICE | | | | X | | |
| WRITES EFFECTIVELY | | | | | X | |
| SECURITY CONSCIOUS | | | | | X | |
| THINKS CLEARLY | | | | | X | |
| DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS | | | | | X | |
| OTHER (Specify) | | | | | | |

SEE SECTION "F" ON REVERSE SIDE

SECRET

| SECTION E | NARRATIVE | DESCRIPTION OF MANNER OF JOB PERFORMANCE |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|------------------------------------------|
| <p>State strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.</p> <p>Mr. Kimsey possesses a wealth of knowledge in his technical field which, when skillfully and tactfully utilized, helps to increase the productive capability of his Section's activities.</p> <p>This thorough knowledge of A&R activities enables him to present his oral briefings in an informative and interesting manner.</p> <p>Subject has been downgraded in Specific Duty #1 from a "4" to a "3". The basis for the lower rating in this category warrants the following explanation. There have been numerous and reoccurring complaints from personnel under his supervision that he does not display a complete respect for their professional capabilities. This weakness has definitely decreased the morale of the personnel under his supervision. Mr. Marzen, Chief, TSD/GARB, has discussed all areas of weaknesses with the Ratee and pointed out how they affect the overall work aspects of this section of TSD/GARB.</p> | | |
| SECTION F CERTIFICATION AND COMMENTS | | |
| 1. BY EMPLOYEE | | |
| I certify that I have seen Sections A, B, C, D and E of this Report. | | |
| DATE | SIGNATURE OF EMPLOYEE | |
| 7 March 1962 | | |
| 2. BY SUPERVISOR | | |
| MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION | IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION | |
| 58 | | |
| IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON. | | |
| EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS | | REPORT MADE WITHIN LAST 90 DAYS |
| OTHER (Specify): | | |
| DATE | OFFICIAL TITLE OF SUPERVISOR | TYPED OR PRINTED NAME AND SIGNATURE |
| 7 March 1962 | DC/TSD/GARB | |
| 3. BY REVIEWING OFFICIAL | | |
| I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION. | | |
| I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION. | | |
| I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION. | | |
| I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE. | | |
| COMMENTS OF REVIEWING OFFICIAL | | |
| <p>This was not signed by Mr. Kimsey and was not forwarded in March 1962 as Mr. Kimsey was in the process of leaving as a result of the 701 action.</p> | | |
| DATE | OFFICIAL TITLE OF REVIEWING OFFICIAL | TYPED OR PRINTED NAME AND SIGNATURE |
| 13 February 1963 | Chief, TSD/GARB | Joseph F. Marzen |

SECRET

SECRET
(When Filled In)

| 8 MAY 1961
FITNESS REPORT | | | | | | EMPLOYEE SERIAL NUMBER
61555 | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------|--|---------------------------------------------------------|--------------|---------------------------------------------------------------------------------------|------------------------|
| SECTION A GENERAL | | | | | | | |
| 1. NAME (Last) KIMSEY | | (First) Herman | | (Middle) E. | | 2. DATE OF BIRTH
11 Dec 1916 | |
| 3. SEX
M | | 4. GRADE
GS-13 | | 5. OFF/DIV/BR OF ASSIGNMENT
DDP/TSD/AUTH/GARB | | | |
| SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES | | | | | | | |
| List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised). | | | | | | | |
| 1 - Unsatisfactory | | 2 - Barely adequate | | 3 - Acceptable | | 4 - Competent | |
| 5 - Excellent | | 6 - Superior | | 7 - Outstanding | | | |
| SPECIFIC DUTY NO. 1
Supervises A&R Section personnel | | | | RATING NO.
4 | | SPECIFIC DUTY NO. 4
Oral Briefings | |
| SPECIFIC DUTY NO. 2
Questioned Document Analysis | | | | RATING NO.
5 | | SPECIFIC DUTY NO. 5
Monitoring the writing of and writing technical reports | |
| SPECIFIC DUTY NO. 3
Liaison with other Government Questioned Document Labs. | | | | RATING NO.
5 | | SPECIFIC DUTY NO. 6
Monitors Graphology Program | |
| SPECIFIC DUTY NO. 4
Monitors Graphology Program | | | | RATING NO.
5 | | | |
| SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION | | | | | | | |
| Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance. | | | | | | | |
| 1 - Performance in many important respects fails to meet requirements.
2 - Performance meets most requirements but is deficient in one or more important respects.
3 - Performance clearly meets basic requirements.
4 - Performance clearly exceeds basic requirements.
5 - Performance in every important respect is superior.
6 - Performance in every respect is outstanding. | | | | | | | RATING NO.
4 |
| SECTION D DESCRIPTION OF THE EMPLOYEE | | | | | | | |
| In the rating boxes below, check (X) the degree to which each characteristic applies to the employee | | | | | | | |
| 1 - Least possible degree | | 2 - Limited degree | | 3 - Normal degree | | 4 - Above average degree | |
| 5 - Outstanding degree | | | | | | | |
| CHARACTERISTICS | | | | NOT APPLICABLE | NOT OBSERVED | RATING | |
| | | | | | | 1 | 2 |
| GETS THINGS DONE | | | | | | 3 | 4 |
| RESOURCEFUL | | | | | | | 5 |
| ACCEPTS RESPONSIBILITIES | | | | | | | X |
| CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES | | | | | | | X |
| DOES HIS JOB WITHOUT STRONG SUPPORT | | | | | | | X |
| FACILITATES SMOOTH OPERATION OF HIS OFFICE | | | | | | | X |
| WRITES EFFECTIVELY | | | | | | | X |
| SECURITY CONSCIOUS | | | | | | | X |
| THINKS CLEARLY | | | | | | | X |
| DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS | | | | | | | X |
| OTHER (SPECIFY): | | | | | | | X |

FORM 45 OBSOLETE PREVIOUS EDITIONS.

SECRET

SECRET

(When Filled In)

SECTION E

NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for holding greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the basis for determining future personnel actions.

Subject continues to perform his duties as Supervisor of ^{11/27} ~~Chief~~ complex A&R activities in a competent manner. His knowledge of the technical aspects of his Sections' many functions help to insure a continuation of work flow and his ability to absorb and retain technical data related to his field of endeavor serves as an aid in the presentations of his numerous oral briefings.

One apparent weakness, which he continues to retain, is in his work relations with technical personnel; he has a tendency to drift from main topic under discussion to unrelated subjects, which, while they may be informative, decreases not only the Subject's productive capability, but, also that of the technical personnel.

SECTION F

CERTIFICATION AND COMMENTS

| | | |
|----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|---------------------------------------------|
| 1. BY EMPLOYEE | | |
| I certify that I have seen Sections A, B, C, D and E of this Report. | | |
| DATE | SIGNATURE OF EMPLOYEE | |
| 31 January 1961 | <i>A. E. Kinnery</i> | |
| 2. BY SUPERVISOR | | |
| MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION | IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION | |
| 46 | | |
| IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON. | | |
| EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS | REPORT MADE WITHIN LAST 90 DAYS | |
| OTHER (Specify): | | |
| DATE | OFFICIAL TITLE OF SUPERVISOR | TYPED OR PRINTED NAME AND SIGNATURE |
| 31 January 1961 | DC/TSD/GARB/ | |
| 3. BY REVIEWING OFFICIAL | | |
| <input checked="" type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION. | | |
| <input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION. | | |
| <input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION. | | |
| <input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE. | | |
| COMMENTS OF REVIEWING OFFICIAL | | |
| | | |
| DATE | OFFICIAL TITLE OF REVIEWING OFFICIAL | TYPED OR PRINTED NAME AND SIGNATURE |
| 31 January 1961 | Chief, TSD/GARB | <i>Joseph F. Marzen</i>
JOSEPH F. MARZEN |

SECRET

SECRET
When Filled InRecorded
- CDD

| FITNESS REPORT | | | | EMPLOYEE SERIAL NUMBER | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------|--------------------------|--------|------------------------|---|---|---|
| | | | | 161555 | | | | | | | |
| SECTION A GENERAL | | | | | | | | | | | |
| 1. NAME (Last) (First) (Middle) | | 2. DATE OF BIRTH | | 3. SEX | 4. GRADE | | | | | | |
| KIMSEY, Herman E. | | 11 Dec. 1916 | | M | GS-13 | | | | | | |
| 5. SERVICE DESIGNATION | | 6. OFFICIAL POSITION TITLE | | 7. OFF. DIV/BR OF ASSIGNMENT | | | | | | | |
| DT | | IO TECH AIDS | | DDP/TSS/A/GARD | | | | | | | |
| 8. CAREER STAFF STATUS | | | 9. TYPE OF REPORT | | | | | | | | |
| <input type="checkbox"/> NOT ELIGIBLE
<input checked="" type="checkbox"/> MEMBER
<input type="checkbox"/> PENDING
<input type="checkbox"/> DECLINED | | | <input type="checkbox"/> DEFERRED
<input type="checkbox"/> DENIED
<input checked="" type="checkbox"/> ANNUAL
<input type="checkbox"/> REASSIGNMENT/SUPERVISOR
<input type="checkbox"/> REASSIGNMENT/EMPLOYEE | | | | | | | | |
| 10. DATE REPORT DUE IN O.P. | | 11. REPORTING PERIOD | | | | | | | | | |
| 31 January 1960 | | Jan 1959 to Jan 1960 | | | | | | | | | |
| SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES | | | | | | | | | | | |
| List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised). | | | | | | | | | | | |
| 1 - Unsatisfactory 2 - Barely adequate 3 - Acceptable 4 - Competent 5 - Excellent 6 - Superior 7 - Outstanding | | | | | | | | | | | |
| SPECIFIC DUTY NO. 1 | | RATING SPECIFIC DUTY NO. 4 | | RATING NO. | | | | | | | |
| Supervises A&R Branch personnel and activities | | 4 | | 4 | | | | | | | |
| SPECIFIC DUTY NO. 2 | | RATING SPECIFIC DUTY NO. 5 | | RATING NO. | | | | | | | |
| Questioned Document Analysis | | 5 | | 5 | | | | | | | |
| SPECIFIC DUTY NO. 3 | | RATING SPECIFIC DUTY NO. 5 | | RATING NO. | | | | | | | |
| Liaison with other Government Questioned Document Labs. | | 5 | | 5 | | | | | | | |
| SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION | | | | | | | | | | | |
| Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance. | | | | | | | | | | | |
| 1 - Performance in many important respects fails to meet requirements.
2 - Performance meets most requirements but is deficient in one or more important respects.
3 - Performance clearly meets basic requirements.
4 - Performance clearly exceeds basic requirements.
5 - Performance in every important respect is superior.
6 - Performance in every respect is outstanding. | | | | | RATING NO.
4 | | | | | | |
| SECTION D DESCRIPTION OF THE EMPLOYEE | | | | | | | | | | | |
| In the rating boxes below, check (X) the degree to which each characteristic applies to the employee | | | | | | | | | | | |
| 1 - Least possible degree | | 2 - Limited degree | | 3 - Normal degree | | 4 - Above average degree | | 5 - Outstanding degree | | | |
| CHARACTERISTICS | | | | | NOT APPLICABLE | NOT OBSERVED | RATING | | | | |
| | | | | | | | 1 | 2 | 3 | 4 | 5 |
| GETS THINGS DONE | | | | | | | | | | X | |
| RESOURCEFUL | | | | | | | | | | X | |
| ACCEPTS RESPONSIBILITIES | | | | | | | | | | X | |
| CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES | | | | | | | | | | X | |
| DOES HIS JOB WITHOUT STRONG SUPPORT | | | | | | | | | | X | |
| FACILITATES SMOOTH OPERATION OF HIS OFFICE | | | | | | | | | | X | |
| WRITES EFFECTIVELY | | | | | | | | | | X | |
| SECURITY CONSCIOUS | | | | | | | | | | X | |
| THINKS CLEARLY | | | | | | | | | | X | |
| DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS | | | | | | | | | | X | |
| OTHER (Specify): | | | | | | | | | | | |
| SEE SECTION "F" ON REVERSE SIDE | | | | | | | | | | | |

SECRET

(When Filled In)

SECTION E

NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

Subject's thorough technical knowledge of A&R activities qualifies him as a competent Supervisor. Since the last reporting period, he has delegated more responsibilities to personnel under his supervision. This, in effect, has increased the productive capability of his Branch.

COPIES OF REPORT

911 235 PM '60

MAIL ROOM

SECTION F

CERTIFICATION AND COMMENTS

| | | |
|----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|---------------------------------------------|
| 1. BY EMPLOYEE | | |
| I certify that I have seen Sections A, B, C, D and E of this Report. | | |
| DATE | SIGNATURE OF EMPLOYEE | |
| 27 January 1960 | <i>H. E. Kemsey</i> | |
| 2. BY SUPERVISOR | | |
| MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION | IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION | |
| 34 | | |
| IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON. | | |
| EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS | REPORT MADE WITHIN LAST 90 DAYS | |
| OTHER (Specify): | | |
| DATE | OFFICIAL TITLE OF SUPERVISOR | TYPED OR PRINTED NAME AND SIGNATURE |
| 27 January 1960 | DC/TSS/GARD | |
| 3. BY REVIEWING OFFICIAL | | |
| <input checked="" type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION. | | |
| <input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION. | | |
| <input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION. | | |
| <input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE. | | |
| COMMENTS OF REVIEWING OFFICIAL | | |
| | | |
| DATE | OFFICIAL TITLE OF REVIEWING OFFICIAL | TYPED OR PRINTED NAME AND SIGNATURE |
| 27 January 1960 | Chief, TSS/GARD | <i>Joseph F. Marzen</i>
JOSEPH F. MARZEN |

SECRET

SECRET
(When Filled In)

| | | | | | | | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-----------------------------------------------------------|--------------------------|--------|---|---|---|---|--|
| FITNESS REPORT | | | | | | EMPLOYEE SERIAL NUMBER
161555 | | | | | | | |
| SECTION A GENERAL | | | | | | | | | | | | | |
| 1. NAME (Last) (First) (Middle)
KIMSEY Herman E. | | | 2. DATE OF BIRTH
11 Dec 1916 | | 3. SEX
M | | 4. GRADE
GS-13 | | | | | | |
| 5. SERVICE DESIGNATION & OFFICIAL POSITION TITLE
DT IO TECH AIDS | | | | | 7. OFF/DIV/BR OF ASSIGNMENT
DDP/TSS/A/GARD | | | | | | | | |
| 6. CAREER STAFF STATUS | | | | 8. TYPE OF REPORT | | | | | | | | | |
| <input type="checkbox"/> NOT ELIGIBLE <input checked="" type="checkbox"/> MEMBER <input type="checkbox"/> DEPENDENT
<input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED | | | | <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT/SUPERVISOR
<input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT/EMPLOYEE
<input type="checkbox"/> SPECIAL (Specify) | | | | | | | | | |
| 10. DATE REPORT DUE IN G.P.
January 1959 | | 11. REPORTING PERIOD
From Dec 1957 to Jan 1959 | | | | | | | | | | | |
| SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES | | | | | | | | | | | | | |
| List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised). | | | | | | | | | | | | | |
| 1 - Unsatisfactory 2 - Barely adequate 3 - Acceptable 4 - Competent 5 - Excellent 6 - Superior 7 - Outstanding | | | | | | | | | | | | | |
| SPECIFIC DUTY NO. 1
Supervises A&R Branch Personnel | | | | RATING NO.
3 | | SPECIFIC DUTY NO. 4
Oral Briefing | | | | | | | |
| SPECIFIC DUTY NO. 2
Questioned Document Analysis | | | | RATING NO.
5 | | SPECIFIC DUTY NO. 5
Writing Technical Reports | | | | | | | |
| SPECIFIC DUTY NO. 3
Liaison with other Gov't. Questioned Document Labs. | | | | RATING NO.
5 | | SPECIFIC DUTY NO. 6
Monitors graphology program | | | | | | | |
| | | | | | | RATING NO.
5 | | | | | | | |
| SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION | | | | | | | | | | | | | |
| Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance. | | | | | | | | | | | | | |
| 1 - Performance in many important respects fails to meet requirements.
2 - Performance meets most requirements but is deficient in one or more important respects.
3 - Performance barely meets basic requirements.
4 - Performance shortly exceeds basic requirements.
5 - Performance in every important respect is superior.
6 - Performance in every respect is outstanding. | | | | | | | RATING NO.
4 | | | | | | |
| SECTION D DESCRIPTION OF THE EMPLOYEE | | | | | | | | | | | | | |
| In the rating boxes below, check (X) the degree to which each characteristic applies to the employee. | | | | | | | | | | | | | |
| 1 - Least possible degree 2 - Limited degree 3 - Normal degree 4 - Above average degree 5 - Outstanding degree | | | | | | | | | | | | | |
| CHARACTERISTICS | | | | | | NOT APPL. CABLE | NOT OBS. SERVED | RATING | | | | | |
| | | | | | | | | 1 | 2 | 3 | 4 | 5 | |
| GETS THINGS DONE | | | | | | | | | | | | | |
| RESOURCEFUL | | | | | | | | | | X | | | |
| ACCEPTS RESPONSIBILITIES | | | | | | | | | | | X | | |
| CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES | | | | | | | | | | | | X | |
| DOES HIS JOB WITHOUT STRONG SUPPORT | | | | | | | | | | | | X | |
| FACILITATES SMOOTH OPERATION OF HIS OFFICE | | | | | | | | | | X | | | |
| WRITES EFFECTIVELY | | | | | | | | | | | | X | |
| SECURITY CONSCIOUS | | | | | | | | | | | | X | |
| THINKS CLEARLY | | | | | | | | | | | | X | |
| DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS | | | | | | | | | | | | X | |
| OTHER (Specify): | | | | | | | | | | | | X | |

SEE SECTION "I" ON REVERSE SIDE

SECRET

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions for improvement of his performance, and his potential for development and resuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTION B, C, D, and E to provide the basis for determining future personnel actions.

Subject is a very competent supervisor from a technical standpoint in that he has a thorough applicable knowledge of the complex ~~HR~~ ^{TSS} activities. In many respects this tends to contribute to his main weakness in that he measures the potential of his personnel by his own level of proficiency rather than a team level. This creates a situation whereby he has tendency to perform many functions which he could delegate to his personnel.

SECTION F CERTIFICATION AND COMMENTS

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| 1. BY EMPLOYEE | |
| I certify that I have seen Sections A, B, C, D and E of this Report. | |
| DATE
27 Jan 1959 | SIGNATURE OF EMPLOYEE
<i>[Signature]</i> |
| 2. BY SUPERVISOR | |
| MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION
22 | IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION |
| IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON. | |
| EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS | REPORT MADE WITHIN LAST 90 DAYS |
| OTHER (Specify): | |
| DATE
27 Jan. 1959 | OFFICIAL TITLE OF SUPERVISOR
Deputy Chief, TSS/GARD |
| TYPED OR PRINTED NAME AND SIGNATURE
<i>[Signature]</i> | |
| 3. BY REVIEWING OFFICIAL | |
| <input checked="" type="checkbox"/> I SHOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.
<input type="checkbox"/> I SHOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.
<input type="checkbox"/> I SHOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.
<input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE. | |
| COMMENTS OF REVIEWING OFFICIAL | |
| DATE
27 Jan. 1959 | OFFICIAL TITLE OF REVIEWING OFFICIAL
Chief, TSS/GARD |
| TYPED OR PRINTED NAME AND SIGNATURE
<i>[Signature]</i>
Joseph F. Mattern | |

SECRET

SECRET

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20.170. It is recommended that you read the entire form before completing any portion. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8 of Section "A" below.

SECTION A.

GENERAL

| | | | |
|---------------------------------------------|--------------------------|----------------------------------------------------|------------------------|
| 1. NAME: (Last) (First) (Middle) | 2. DATE OF BIRTH | 3. GRADE | 4. SERVICE DESIGNATION |
| KIMSEY Herman E. | 11 Dec 1916 | M | DT |
| 5. OFFICE DIVISION/BRANCH OF ASSIGNMENT | | 6. OFFICE OF ORIGIN TITLE | |
| DDP/TSS/A/Graphic Arts Repro. Div. | | IO TECH AIDS | |
| 7. GRADE | 8. DATE REPORT DUE IN OF | 9. PERIOD COVERED BY THIS REPORT (Inclusive dates) | |
| GS-13 | 23 December 1957 | 23 December 1956 to 23 December 1957 | |
| 10. TYPE OF REPORT (Check one) | 11. SPECIAL (Specify) | | |
| <input checked="" type="checkbox"/> Regular | | | |

SECTION B.

CERTIFICATION

1. FOR THE WATER: THIS REPORT ☒ WAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

A. CHECK (X) APPROPRIATE STATEMENT(S):

- ☒ THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.
- ☐ THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.
- ☒ I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.

IF INDIVIDUAL IS RATED "C" OR "D", A WARNING LETTER MUST BE ATTACHED TO THIS REPORT.

I HEREBY CERTIFY THAT THE RATED INDIVIDUAL KNOWS HIS EVALUATION AND HIS JOB PERFORMANCE BECAUSE (Specify):

30 Dec. 1957

C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR

Joseph E. Marzen

D. SUPERVISOR'S OFFICIAL TITLE

C/TSS/GARD

2. FOR THE REVIEWING OFFICER: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY DATE
17 JAN 1958
Reviewed by RUD

☐ CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE

30 Dec. 1957

B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL

Charles J. Ryan

C. OFFICIAL TITLE OF REVIEWING OFFICIAL

ASSTC/TSS/AUTH

SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account only in Section D.

4/5

1. DOES NOT PERFORM DUTIES ACCURATELY. HE IS INCOMPETENT.
2. ADEQUATE IN PERFORMANCE, ALTHOUGH HE HAS HAD NEGLIGENT GUIDANCE OR TRAINING. HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY, OCCASIONALLY WITHIN SOME AREA OF WEAKNESS.
4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
5. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS

FORM NO. 45 (Part I) OF FORMS OF THE OFFICE OF PERSONNEL, U.S. ARMY, 1957 EDITION

SECRET

Performance

SECRET

OFFICE OF PERSONNEL

1. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

DIRECTIONS:

- State in the spaces below up to six of the more important SPECIFIC duties performed. Place the most important first. Do not include minor or insignificant duties.
- Rate performance on each specific duty considering ONLY efficiency in performance of this duty (do not rate as supervisor those who supervise a secretary only).
- Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.
- Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- Be specific. Examples of the kind of duties that might be rated are:

| | | |
|-----------------------------|--------------------------------|--------------------------------|
| ORAL BRIEFING | MAN AND MESS APPA KNOWLEDGE | CONDUCTS INTERROGATIONS |
| GIVING LECTURES | DEVELOPS NEW PROGRAMS | PREPARES SUMMARIES |
| CONDUCTING SEMINARS | ANALYZES INDIVIDUAL REPORTS | TRANSLATES GERMAN |
| WRITING TECHNICAL REPORTS | MANAGES FILES | DEBRIEFING SOURCES |
| CONDUCTING EXTERNAL LIAISON | OPERATES RADIO | KEEPS BOOKS |
| TYPING | COORDINATES WITH OTHER OFFICES | DRIVES TRUCK |
| TAKING DICTATION | WRITES REGULATIONS | MAINTAINS AIR CONDITIONING |
| SUPERVISING | PREPARES CORRESPONDENCE | EVALUATES SIGNIFICANCE OF DATA |
- For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

2. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.

Background and years of experience with Agency, qualifies subject as an excellent technician in all facets of questioned document analysis. He is performing an excellent job, monitoring the graphology program. He constantly strives for new ideas in his field of endeavor. In presenting oral briefings and in job discussions, he still retains the tendency of drifting from the immediate topic of discussion.

SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION

DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or references...and how he fits in with your team, compare him with others doing similar work at about the same level.

1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED

2. OF DOUBTFUL SUITABILITY - COULD NOT WELL ACCEPTED - IF I HAD KNOWN WHAT I KNOW NOW

3. A BARELY ACCEPTABLE EMPLOYEE - BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION

4. OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION

5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS

6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION

7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? ☐ YES ☒ NO. IF YES, EXPLAIN FULLY:

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is not to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision for at least 90 days. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the OI no later than 30 days after the due date indicated in item 8 of Section F below.

SECTION E.

GENERAL

| | | | |
|----------------------------------------|--------------------------|----------------------------------------------------|------------------------|
| 1. NAME (Last) (First) (Middle) | 2. DATE OF BIRTH | 3. SEX | 4. SERVICE DESIGNATION |
| KIMSEY Herman E. | 11 Dec 1916 | M | DT |
| 5. OFFICE/SECTION BRANCH OF ASSIGNMENT | | 6. OFFICIAL POSITION TITLE | |
| DDP/TSS/A/Graphic Arts Repro. Div. | | IO TECH AIDS | |
| 7. GRADE | 8. DATE REPORT DUE IN OF | 9. PERIOD COVERED BY THIS REPORT (Inclusive dates) | |
| GS-13 | 23 December 1957 | 23 December 1956 to 23 December 1957 | |
| 10. TYPE OF REPORT (Check one) | INITIAL | PERMANENT SUPERVISOR | SPECIAL (Specify) |
| | ANNUAL | PERMANENT EMPLOYEE | |

SECTION F.

CERTIFICATION

| | | |
|-----------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-----------------------------------------|
| 1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGMENT OF THE INDIVIDUAL BEING RATED | | |
| A. THIS DATE | B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR | C. SUPERVISOR'S OFFICIAL TITLE |
| 30 Dec. 1957 | Joseph F. Marzen <i>Joseph F. Marzen</i> | C/TSS/GARD |
| 2. FOR THE OFFERING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO. | | |
| A. THIS DATE | B. TYPED OR PRINTED NAME AND SIGNATURE OF OFFICIAL | C. OFFICIAL TITLE OF REVIEWING OFFICIAL |
| 30 Dec. 1957 | | ASSTC/TSS/AUTH |

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES
 DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

- | | |
|---|--------------------------------------------------------------------------------------------------------------------------------|
| 4 | 1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED |
| | 2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED |
| | 3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES |
| | 4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES |
| | 5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING |
| | 6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL |
| | 7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES |

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☒ Yes ☐ No. If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "Actual" column. If based on opinion of his potential, note the rating in the "Potential" column.

| DESCRIPTIVE RATING NUMBER | 0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION | 1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION | 2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION | 3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION |
|---------------------------|--------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| ACTUAL | POTENTIAL | DESCRIPTIVE SITUATION | | |
| 2 | | A GROUP DURING THE BASIC JOB GROUP PERIOD, stenographers, technicians or professional specialists of various kinds, where contact with immediate superiors is frequent (First line supervisor) | | |
| 2 | | A GROUP OF SUPERVISORS WHO SHARE THE BASIC JOB (Second line supervisors) | | |
| | 1 | A GROUP, ONE WAY OR ANOTHER OF SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level) | | |
| | 2 | WHEN CONTACT WITH IMMEDIATE SUPERIORS IS NOT FREQUENT | | |
| 2 | | WHEN IMMEDIATE SUPERIOR'S ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION | | |
| 2 | | WHEN IMMEDIATE SUPERIOR'S DUTIES INVOLVE MEMBERS OF THE OPPOSITE SEX | | |
| | 0 | OTHER (Specify) | | |

FORM NO. 45 (Part II)
 1-55-10
 REPLACES FORM NO. 45-10-10
 OF FORMS AT AND FOR THE
 GSA GSA

SECRET

Potential 31 1957

SECRET

(When Filled In)

OFFICE OF PERSONNEL

1. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATEE EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION
20 months

2. COMMENTS CONCERNING POTENTIAL
Subject has technical qualifications but still shows weakness in administrative and management capabilities.

JAN 16 - 9 25 AM '50
MAIL ROOM

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL
None

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS
None

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

2 - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL

CATEGORY NUMBER

1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

| CATEGORY | STATEMENT | CATEGORY | STATEMENT | CATEGORY | STATEMENT |
|----------|---------------------------------------------------|----------|--------------------------------------------------------|----------|--------------------------------------------------------|
| 2 | 1. ABLE TO SEE ANOTHER'S POINT OF VIEW | 4 | 11. HAS HIGH STANDARDS OF ACCOMPLISHMENT | 2 | 21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES |
| 4 | 2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES | 3 | 12. SHOWS ORIGINALITY | 2 | 22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS |
| 4 | 3. HAS INITIATIVE | 2 | 13. ACCEPTS RESPONSIBILITIES | 3 | 23. IS THOUGHTFUL OF OTHERS |
| 4 | 4. IS ANALYTIC IN HIS THINKING | 2 | 14. ADMITS HIS ERRORS | 3 | 24. WORKS WELL UNDER PRESSURE |
| 5 | 5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS | 2 | 15. RESPONDS WELL TO SUPERVISION | 3 | 25. DISPLAYS JUDGEMENT |
| 2 | 6. ENJOYS WHEN HE GETS ASSISTANCE | 3 | 16. DOES HIS JOB WITHOUT STRONG SUPPORT | 4 | 26. IS SECURITY CONSCIOUS |
| 2 | 7. CAN GET ALONG WITH PEOPLE | 4 | 17. COMES UP WITH SOLUTIONS TO PROBLEMS | 4 | 27. IS VERSATILE |
| 4 | 8. HAS MEMORY FOR FACTS | 4 | 18. IS OBSERVANT | 3 | 28. HIS CRITICISM IS CONSTRUCTIVE |
| 2 | 9. GETS THINGS DONE | 3 | 19. THINKS CLEARLY | 3 | 29. FACILITATES SMOOTH OPERATION OF HIS OFFICE |
| 3 | 10. CAN cope WITH EMERGENCIES | 2 | 20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS | 3 | 30. DOES NOT RESOLVE STRONG AND CONTINUOUS SUPERVISION |

SECRET

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FORM NO. 45 (Part I)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER. Consult current instructions for completing this report.

FOR THE SUPERVISOR. This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any portion. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item A. of Section "A" below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle) 2. DATE OF BIRTH 3. SEX 4. SERVICE DESIGNATION
KIMSEY Herman E. 11 Dec 1916 M DT

5. OFFICE-DIVISION BRANCH OF ASSIGNMENT

6. OFFICIAL POSITION TITLE

DDP/TSS/AUTH/Graphic Arts Reproduction IO TECH AIDS

7. GRADE

8. DATE REPORT DUE IN OFFICE

PERIOD COVERED BY THIS REPORT (Inclusive Dates)

GS-12

23 December 1956

22 December 1955 to 23 December 1956

10. TYPE OF REPORT

INITIAL

REASSIGNMENT-SUPERVISOR

SPECIAL (Specify)

(Check one)

ANNUAL

REASSIGNMENT-EMPLOYEE

SECTION B.

CERTIFICATION

1. FOR THE RATER. THIS REPORT ☒ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

A. CHECK (X) APPROPRIATE STATEMENTS:

☒ THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.

☐ THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.

☒ I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.

IF INDIVIDUAL IS RATED "T" IN CE OR C, A WARNING LETTER HAS BEEN SENT TO HIM OR COPY ATTACHED TO THIS REPORT.

I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HIS EVALUATE HIS OWN PERFORMANCE BECAUSE (Specify):

B. THIS DATE

C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR

D. SUPERVISOR'S OFFICIAL TITLE

3-6-57

JOSEPH F. MARZEN

Chief, TSS/GARD

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY: *[Signature]* DATE 26 MAR 1957
Posted Pos. Control
Reviewed by: PUD *[Signature]*

☐ CONTINUED IN ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE

B. SIGNATURE OF REVIEWING OFFICIAL

C. OFFICIAL TITLE OF REVIEWING OFFICIAL

14-3-57

AC/TSS/AUTH

SECTION C.

JOB PERFORMANCE/EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

4

- 1 - DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
- 2 - BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
- 3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY, OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- 4 - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
- 5 - A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- 6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

Occasionally reveals some area of weakness.

FORM NO. 45 (Part I)

REPLACES PREVIOUS EDITIONS OF FORMS 45 AND 45A WHICH ARE OBSOLETE.

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Performance

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(When Filled In)

| 2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|--------------------------------|----------------------------------------------|---------------|-----------------------------|-------------------------|-----------------|-----------------------|--------------------|---------------------|-----------------------------|-------------------|---------------------------|---------------|--------------------|-----------------------------|----------------|-------------|--------|--------------------------------|--------------|------------------|--------------------|----------------------------|-------------|-------------------------|--------------------------------|
| <p>DIRECTIONS:</p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.</p> <p>c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table border="0"> <tr> <td>ORAL BRIEFING</td> <td>HAS AND USES AREA KNOWLEDGE</td> <td>CONDUCTS INTERROGATIONS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>DEBRIEFING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPING</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p> | | | | ORAL BRIEFING | HAS AND USES AREA KNOWLEDGE | CONDUCTS INTERROGATIONS | GIVING LECTURES | DEVELOPS NEW PROGRAMS | PREPARES SUMMARIES | CONDUCTING SEMINARS | ANALYZES INDUSTRIAL REPORTS | TRANSLATES GERMAN | WRITING TECHNICAL REPORTS | MANAGES FILES | DEBRIEFING SOURCES | CONDUCTING EXTERNAL LIAISON | OPERATES RADIO | KEEPS BOOKS | TYPING | COORDINATES WITH OTHER OFFICES | DRIVES TRUCK | TAKING DICTATION | WRITES REGULATIONS | MAINTAINS AIR CONDITIONING | SUPERVISING | PREPARES CORRESPONDENCE | EVALUATES SIGNIFICANCE OF DATA |
| ORAL BRIEFING | HAS AND USES AREA KNOWLEDGE | CONDUCTS INTERROGATIONS | | | | | | | | | | | | | | | | | | | | | | | | | |
| GIVING LECTURES | DEVELOPS NEW PROGRAMS | PREPARES SUMMARIES | | | | | | | | | | | | | | | | | | | | | | | | | |
| CONDUCTING SEMINARS | ANALYZES INDUSTRIAL REPORTS | TRANSLATES GERMAN | | | | | | | | | | | | | | | | | | | | | | | | | |
| WRITING TECHNICAL REPORTS | MANAGES FILES | DEBRIEFING SOURCES | | | | | | | | | | | | | | | | | | | | | | | | | |
| CONDUCTING EXTERNAL LIAISON | OPERATES RADIO | KEEPS BOOKS | | | | | | | | | | | | | | | | | | | | | | | | | |
| TYPING | COORDINATES WITH OTHER OFFICES | DRIVES TRUCK | | | | | | | | | | | | | | | | | | | | | | | | | |
| TAKING DICTATION | WRITES REGULATIONS | MAINTAINS AIR CONDITIONING | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUPERVISING | PREPARES CORRESPONDENCE | EVALUATES SIGNIFICANCE OF DATA | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>DESCRIPTIVE RATING NUMBER</p> <p>1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY</p> <p>2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY</p> <p>3 - PERFORMS THIS DUTY ACCEPTABLY</p> <p>4 - PERFORMS THIS DUTY IN A COMPETENT MANNER</p> <p>5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB</p> <p>6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS</p> <p>7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SPECIFIC DUTY NO. 1 | | RATING NUMBER | SPECIFIC DUTY NO. 2 | | | | | | | | | | | | | | | | | | | | | | | | |
| Branch Supervises A&R | | 3 | Liaison with other Government Organizations) | | | | | | | | | | | | | | | | | | | | | | | | |
| SPECIFIC DUTY NO. 2 | | RATING NUMBER | SPECIFIC DUTY NO. 3 | | | | | | | | | | | | | | | | | | | | | | | | |
| Questioned Document Analysis | | 5 | Questioned Documents | | | | | | | | | | | | | | | | | | | | | | | | |
| SPECIFIC DUTY NO. 3 | | RATING NUMBER | SPECIFIC DUTY NO. 4 | | | | | | | | | | | | | | | | | | | | | | | | |
| Document Analysis (for Repro.) | | 3 | Oral Briefing | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.</p> <p>Knowledge and ability to perform document analysis, questioned document analysis, identification and comparison of handwriting and typewriting. He constantly strives for new techniques in his field of endeavor. Has tendency to present his discussions too indirectly so that the importance of the main topic being discussed often becomes confused, vague and sometimes lost.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.</p> <p>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</p> <p>2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</p> <p>3 - A BARELY ACCEPTABLE EMPLOYEE...BEYOND AVERAGE BUT WITH NO REACHES SUFFICIENTLY OUTSTANDING TO Warrant his separation</p> <p>4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</p> <p>5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS</p> <p>6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</p> <p>7 - EXCELS BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>IS THIS INDIVIDUAL BETTER SUITED FOR NOW IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>EXPLAIN WHY:</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the IV no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E.

GENERAL

| | | | |
|-----------------------------------------------------|------------------------------------------------------------------------------------|--------|------------------------|
| 1. NAME (Last) (First) (Middle) | 2. DATE OF BIRTH | 3. SEX | 4. SERVICE DESIGNATION |
| KIMSEY Herman E. | 11 Dec 1916 | M | DT |
| 5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT | | | |
| DDP/TSS/AUTH/Graphic Arts Reproduction IO TECH AIDS | | | |
| 7. GRADE | 8. DATE REPORT DUE IN OP DIVISION. PERIOD COVERED BY THIS REPORT (Inclusive dates) | | |
| GS-12 | 23 December 1956 22 December 1955 to 23 December 1956 | | |
| 10. TYPE OF REPORT (Check one) | REASSIGNMENT-SUPERVISOR | | |
| XX ANNUAL | REASSIGNMENT-EMPLOYEE | | |
| SPECIAL (Specify) | | | |

SECTION F.

CERTIFICATION

| | | |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-----------------------------------------|
| 1. FOR THE DATED: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED | | |
| A. THIS DATE | B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR | C. SUPERVISOR'S OFFICIAL TITLE |
| 3-6-57 | JOSEPH F. MARZEN <i>Joseph F. Marzen</i> | C/TSS/GARD |
| 2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IS ATTACHED MEMO. | | |
| A. THIS DATE | B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL | C. OFFICIAL TITLE OF REVIEWING OFFICIAL |
| 14-3-57 | | AC/TSS/AUTH |

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES
DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

| | |
|---------------|--------------------------------------------------------------------------------------------------------------------------------|
| RATING NUMBER | 1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED |
| | 2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED |
| | 3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES |
| | 4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES |
| | 5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING |
| | 6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL |
| | 7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES |

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☒ Yes ☐ No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

| DESCRIPTIVE RATING NUMBER | 2 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION | 1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION | 3 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION | 5 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION |
|---------------------------|--------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| ACTUAL | POTENTIAL | DESCRIPTIVE SITUATION | | |
| 2 | | A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) whose contact with immediate subordinates is frequent (First line supervisor) | | |
| 1 | | A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors) | | |
| | 1 | A GROUP, WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level) | | |
| | 2 | WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT | | |
| 2 | | WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION | | |
| 2 | | WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX | | |
| | | OTHER (Specify) | | |

FORM NO. 45 (Part II) REPLACES PREVIOUS EDITIONS OF FORMS 45 AND 451 WHICH ARE OBSOLETE

SECRET

Potential

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(When Filled In)

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------|--------------------------------------------------------|----------|--------------------------------------------------------|
| 3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE NAMED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION
10 months | | | | | |
| 4. COMMENTS CONCERNING POTENTIAL
Subject has technical qualifications but shows weakness in administrative and management capabilities. | | | | | |
| SECTION II. FUTURE PLANS
1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL
None, except on-the-job training and experience in the administrative functions of his branch. | | | | | |
| 2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS
None | | | | | |
| SECTION I. DESCRIPTION OF INDIVIDUAL
DIRECTIONS: This section is provided as a guide to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.
X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE | | | | | |
| CATEGORY | STATEMENT | CATEGORY | STATEMENT | CATEGORY | STATEMENT |
| 2 | 1. ABLE TO SEE ANOTHER'S POINT OF VIEW | 4 | 11. HAS HIGH STANDARDS OF ACCOMPLISHMENT | 2 | 21. IS EFFECTIVE IN DISCUSSING WITH ASSOCIATES |
| 3 | 2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES | 5 | 12. SHOWS ORIGINALITY | 3 | 22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS |
| 4 | 3. HAS INITIATIVE | 2 | 13. ACCEPTS RESPONSIBILITY | 3 | 23. IS THOUGHTFUL OF OTHERS |
| 3 | 4. IS ANALYTIC IN HIS THINKING | 2 | 14. ADMITS HIS ERRORS | 3 | 24. WORKS WELL UNDER PRESSURE |
| 5 | 5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS | 2 | 15. RESPONDS WELL TO SUPERVISION | 2 | 25. DISPLAYS JUDGMENT |
| 2 | 6. KNOWS WHEN TO SEEK ASSISTANCE | 3 | 16. DOES HIS JOB WITHOUT STRONG SUPPORT | 4 | 26. IS SECURITY CONSCIOUS |
| 2 | 7. CAN GET ALONG WITH PEOPLE | 3 | 17. COMES UP WITH SOLUTIONS TO PROBLEMS | 4 | 27. IS VERSATILE |
| 4 | 8. HAS MEMORY FOR FACTS | 4 | 18. IS OBEDIENT | 4 | 28. HIS CRITICISM IS CONSTRUCTIVE |
| 2 | 9. GETS THINGS DONE | 5 | 19. THINKS CLEARLY | 3 | 29. FACILITATES SMOOTH OPERATION OF HIS OFFICE |
| 3 | 10. CAN COPE WITH EMERGENCIES | 2 | 20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS | 3 | 30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION |

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SECRET
(When Filled In)

FITNESS REPORT

The Fitness Report is an important factor in agency personnel management. It seeks to provide:

1. The agency selection board with information of value when considering the application of an individual for membership in the career service; and
2. A periodic record of job performance as an aid in the effective utilization of personnel.

INSTRUCTIONS

TO THE ADMINISTRATIVE OR PERSONNEL OFFICER: Consult current administrative instructions regarding the initiation and transmittal of this report.

TO THE SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor also assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate with his previous supervisor to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way he knows where he stands.

A final report due 12 Dec 56

JAS 12 Dec 56

IT IS OPTIONAL, WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING RATED

| | | | |
|-------------------------------------------------------|-----------------------------|-----------------------------------------------------|-------------------------------|
| SECTION I (To be filled in by Administrative Officer) | | | |
| 1. NAME (Last) | (First) | (Middle) | 2. DATE OF BIRTH |
| KIMSEY | HERMAN | E. | 11 Dec 1916 |
| 3. DATE OF ENTRANCE ON DUTY | 4. OFFICE ASSIGNED TO | 5. SEX | 6. CAREER DESIGNATION |
| 23 March 1953 | TSS | M | DT |
| 7. DIVISION | 8. BRANCH | 9. NATURE OF ASSIGNMENT | 10. IF FIELD, SPECIFY STATION |
| Graphic Arts Repro. Div. | | XX DEPARTMENTAL | |
| 11. GRADE | 12. DATE THIS REPORT IS DUE | 13. PERIOD COVERED BY THIS REPORT (Inclusive dates) | |
| CS-12 | 22 Dec 1955 | 23 Dec 1954 to 22 Dec 1955 | |

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| SECTION II (To be filled in by Supervisor) | |
| 1. CURRENT POSITION | 2. DATE ASSUMED RESPONSIBILITY FOR POSITION |
| IO Tech Aids 0136-63 | 1 February 1954 |
| 3. WHAT SPECIFIC ASSIGNMENTS OR TASKS ARE TYPICAL OF THOSE GIVEN TO HIM DURING THE PAST THREE TO SIX MONTHS (State in order of frequency): | |

Responsible for technical analysis of documents to be reproduced to determine special materials, techniques involved, existence of check points; analysis and comparison of reproductions and originals and preparation of critique on each reproduction. Determination of authenticity of alleged original documents; determination of source of origin of analysis, including graphology. Evaluation and research into new techniques in graphic arts and authentication areas and development of field expedients for this activity. Maintenance of [redacted] files library of information relative to questioned document work, [redacted]

READ THE ENTIRE FORM BEFORE ATTEMPTING TO COMPLETE ANY ITEM

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| SECTION III | |
| I certify that, during the latter half of the period covered by this report, I have discussed with the rated individual the manner in which he has performed his job and provided suggestions and criticisms wherever needed. I believe that his understanding of my evaluation of his performance is consistent with my evaluation of him as evidenced by this fitness report and I have informed him of his strengths, weaknesses, and on-the-job effectiveness. If performance during the report period has been unsatisfactory, there is attached a copy of the memorandum explaining him of unsatisfactory performance. | |
| This report <input type="checkbox"/> has <input checked="" type="checkbox"/> has not been shown to the individual rated. | |
| THIS DATE | SIGNATURE OF OFFICER (Employee's immediate supervisor) |
| 29 November 1955 | CHARLES YECH, JR. <i>Charles Yech</i> |
| I HAVE REVIEWED THIS REPORT (Comments, if any, are reflected by attached memorandum) | |
| THIS DATE | SIGNATURE OF REVIEWING OFFICIAL (Official not higher in line of authority) |
| | <i>[Signature]</i> |

SECRET
(When Filled In)

SECTION 1A

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptive ~~statements~~ ^{statements} are to be interpreted literally.

On the left hand side of the page below are a series of statements that apply in some degree to most people. On the right hand side of the page are four major categories of descriptions. The ~~statements~~ ^{statements} category is divided into three small blocks; this is to allow you to make finer distinctions if you so desire. Look at the statement on the left - then check the category on the right which best fits how you see the statement ~~person~~ ^{person} you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether the statement applies to an individual. Placing an "X" in the "Does Not Apply" column means that you have the definite opinion that the description is not at all suited to the individual.

| STATEMENTS | U.S. NAVY | CATEGORIES | | | | | |
|-----------------------------------------------------|-----------|--------------|----------------|-----------------------------|--------------------------------|------------------------------------|----------------------------------|
| | | NOT OBSERVED | DOES NOT APPLY | APPLIES TO A LIMITED PEOPLE | APPLIES TO A REASONABLE PEOPLE | APPLIES TO AN ABOVE AVERAGE PEOPLE | APPLIES TO AN OUTSTANDING PEOPLE |
| A. ABLE TO SEE ANOTHER'S POINT OF VIEW. | | 1 | 2 | X 3 | 4 | | 5 |
| B. PRACTICAL. | | | | | | X | |
| 1. A GOOD REPORTER OF EVENTS. | | | | | | X | |
| 2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES. | | | | | | | X |
| 3. CAUTIOUS IN ACTION. | | | | | | X | |
| 4. HAS INITIATIVE. | | | | | | X | |
| 5. UNEMOTIONAL. | | | | | X | | |
| 6. ANALYTIC IN HIS THINKING. | | | | | | X | |
| 7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS. | | | | | | X | |
| 8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS. | | | | | | X | |
| 9. HAS SENSE OF HUMOR. | | | | | | X | |
| 10. KNOWS WHEN TO SEEK ASSISTANCE. | | | | | | X | |
| 11. CALM. | | | | | X | | |
| 12. CAN GET ALONG WITH PEOPLE. | | | | | | X | |
| 13. MEMORY FOR FACTS. | | | | | | X | |
| 14. GETS THINGS DONE. | | | | | | X | |
| 15. KEEPS ORIENTED TOWARD LONG TERM GOALS. | | | | | | X | |
| 16. CAN COPE WITH EMERGENCIES. | | | | | | X | |
| 17. HAS HIGH STANDARDS OF ACCOMPLISHMENT. | | | | | | X | |
| 18. HAS STAMINAL CAN KEEP USING A LONG TIME. | | | | | | X | |
| 19. HAS WIDE RANGE OF INFORMATION. | | | | | | | X |
| 20. SHOWS ORIGINALITY. | | | | | | X | |
| 21. ACCEPTS RESPONSIBILITIES. | | | | | | X | |
| 22. ADMITS HIS ERRORS. | | | | | | X | |
| 23. RESPONDS WELL TO SUPERVISION. | | | | | | X | |
| 24. EVEN DISPOSITION. | | | | | X | | |
| 25. ABLE TO DEPEND ON WITHOUT VIKING SUPPORT. | | | | | | | X |

SECRET

SECRET

[illegible]

SECRET

SECRET

FORM 100-100

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGHS ALL OTHER CONSIDERATIONS.

See "A" above.

OFFICE OF PERSONNEL

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION?

EXT. NO. []

DEC 9 2 12 PM '55

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?

MAIL ROOM

Continued contact with questioned document profession; no formal training in this field available. Training in management and/or broad operational administration when personnel situation/work load permits.

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A, B, C, and D.

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- ☐ 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
- ☐ 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
- ☐ 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- ☐ 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
- ☒ 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- ☐ 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA? ☒ NO ☐ YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the agency.

- ☐ 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE AGENCY... WILL DEFINITELY LEAVE THE AGENCY AT THE FIRST OPPORTUNITY.
- ☐ 2. HAS STRONG NEGATIVE ATTITUDE TOWARD AGENCY... IRRITATED BY RESTRICTIONS... REGARDS AGENCY AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- ☐ 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE AGENCY... BOTHERED BY MINOR FRUSTRATIONS... WILL QUIT IF THESE CONTINUE.
- ☐ 4. HIS ATTITUDE TOWARD THE AGENCY IS INDIFFERENT... HAS "WAIT AND SEE" ATTITUDE... WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- ☐ 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD AGENCY... MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR AGENCY... THINKS IN TERMS OF A CAREER IN THE AGENCY.
- ☐ 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE AGENCY... HAVING AN UNEXPECTED OUTSIDE OPPORTUNITY, WILL PROBABLY INDEAVOR TO MAKE A CAREER IN THE AGENCY.
- ☒ 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE AGENCY... WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE AGENCY.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities normally indicated by promotion.

- ☐ 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- ☐ 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- ☒ 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- ☐ 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- ☐ 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- ☐ 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating... skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- ☐ 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- ☐ 2. OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- ☐ 3. A BARELY ACCEPTABLE EMPLOYEE... DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- ☐ 4. A TYPICAL EMPLOYEE... HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE AGENCY.
- ☐ 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- ☒ 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE AGENCY.
- ☐ 7. FACILELY BY ONLY A FEW IN SUITABILITY FOR WORK IN THE AGENCY.

SECRET

SECRET

FITNESS REPORT

The Fitness Report is an important factor in every personnel management. It ~~is~~ ^{provides} the agency selection board with information of value when considering the appointment of an individual for membership in the career service; and

1. A periodic record of job performance as related to the effective utilization of personnel;

INSTRUCTIONS

TO THE ADMINISTRATIVE OR PERSONNEL OFFICER: Consult current administrative instructions regarding the initiation and transmittal of this report.

TO THE SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate with his previous supervisors to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way you know where he stands.

A. SD-TS *Herman*
12/55

BY DATE

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING RATED

| | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------|--|--------------------------------------|--|-----------------------|--|---------------------------------|--|
| SECTION I (to be filled in by Administrative Officer) | | 1. NAME (Last) KIMSEY, (First) Herman (Middle) E. | | 2. DATE OF BIRTH 11 Dec. 1916 | | 3. SEX M | | 4. CAREER DESIGNATION TS | |
| 5. DATE OF ENTRANCE ON DUTY 23 March 1953 | | 6. OFFICE ASSIGNED TO DDP | | 7. DIVISION TSS | | 8. BRANCH GARD | | 9. GRADE GS-11 | |
| 10. IN FIELD, SPECIFY STATION: <input checked="" type="checkbox"/> DEPARTMENTAL <input type="checkbox"/> FIELD | | 11. PERIOD COVERED BY THIS REPORT (Inclusive dates) 22 December 1953 to 23 December 1954 | | | | | | | |

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| SECTION II (to be filled in by Supervisor) | |
| 1. CURRENT POSITION Chief, Analysis & Research Branch 1290.01 | 2. DATE ASSUMED RESPONSIBILITY FOR POSITION 1 February 1954 |
| 3. WHAT SPECIFIC ASSIGNMENTS OR TASKS ARE TYPICAL OF THOSE GIVEN TO HIM DURING THE PAST THREE TO SIX MONTHS (List in order of frequency): | |
| <p>Makes analyses of documents preliminary to reproduction;</p> <p>determines necessity for special procurement;</p> <p>determines existence of check points, departures from normal security printings;</p> <p>makes critique of finished <input type="text"/> Conducts questioned document analysis for operations desks; <input type="text"/></p> <p><input type="text"/> Conducts training in field expedients of <input type="text"/> and authentication; conducts briefing in general graphic arts activity. Researches into and develops new and field methods for document authentication <input type="text"/></p> <p>Maintains liaison with government and commercial organizations active in fields of documentation, police sciences, etc.</p> | |

READ THE ENTIRE FORM BEFORE ATTEMPTING TO COMPLETE ANY ITEM

SECTION III

I certify that, during the latter half of the period covered by this report, I have discussed with the rated individual the manner in which he has performed his job and provided suggestions and criticisms wherever needed. I believe that his understanding of my evaluation of his performance is consistent with my evaluation of him as evidenced by this fitness report and I have informed him of his strengths, weaknesses, and on-the-job effectiveness. If performance during the report period has been unsatisfactory, there is attached a copy of the memorandum notifying him of unsatisfactory performance.

This report ☐ has ☒ has not been shown to the individual rated.

| | |
|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| THIS DATE 14 Dec. 54 | Signed by rated individual's immediate supervisor:
Charles Yech <i>Charles Yech</i> |
| I HAVE REVIEWED THIS REPORT (Comments, if any, are collected by attached memorandum) | Signed by reviewing official, officer not higher in line of authority:
James H. Drum <i>James H. Drum</i> |
| DATE 15 Dec | |

SECRET
(When Filled In)

SECTION IV

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptive words are to be interpreted literally.

On the left hand side of the page below are a series of statements that apply in some degree to most people. On the right hand side of the page are four major categories of descriptions. The scale within each category is divided into three small boxes; this is to allow you to make finer distinctions if you so desire. Look at the statement on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether a phrase applies to an individual. Placing an "V" in the "Does Not Apply" column means that you have the definite opinion that the description is not at all suited to the individual.

STATEMENTS

CATEGORIES

| STATEMENTS | NOT
OBSERVED | DOES
NOT
APPLY | APPLIES TO A LIMITED DEGREE | | | APPLIES TO A REASONABLE DEGREE | | | APPLIES TO AN ABOVE AVERAGE DEGREE | | | APPLIES TO AN OUTSTANDING DEGREE | | |
|-----------------------------------------------------|-----------------|----------------------|-----------------------------|--|--|--------------------------------|---|---|------------------------------------|---|--|----------------------------------|--|--|
| | | | | | | | | | | | | | | |
| A. ABLE TO SEE ANOTHER'S POINT OF VIEW. | | | X | | | | | | | | | | | |
| B. PRACTICAL. | | | | | | | | | X | | | | | |
| 1. A GOOD REPORTER OF EVENTS. | | | X | | | | | | | | | | | |
| 2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES. | | | | | | | X | | | | | | | |
| 3. CAUTIOUS IN ACTION. | | | | | | | X | | | | | | | |
| 4. HAS INITIATIVE. | | | | | | | | X | | | | | | |
| 5. UNEMOTIONAL. | | | | | | X | | | | | | | | |
| 6. ANALYTIC IN HIS THINKING. | | | | | | | | X | | | | | | |
| 7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS. | | | | | | | | | X | | | | | |
| 8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS. | | | | | | | | | | X | | | | |
| 9. HAS SENSE OF HUMOR. | | | | | | | X | | | | | | | |
| 10. KNOWS WHEN TO SEEK ASSISTANCE. | | | | | | X | | | | | | | | |
| 11. CALM. | | | X | | | | | | | | | | | |
| 12. CAN GET ALONG WITH PEOPLE. | | | | | | | | X | | | | | | |
| 13. MEMORY FOR FACTS. | | | | | | | X | | | | | | | |
| 14. GETS THINGS DONE. | | | | | | | X | | | | | | | |
| 15. KEEPS ORIENTED TOWARD LONG TERM GOALS. | | | | | | | X | | | | | | | |
| 16. CAN COPE WITH EMERGENCIES. | | | | | | | | X | | | | | | |
| 17. HAS HIGH STANDARDS OF ACCOMPLISHMENT. | | | | | | | | | X | | | | | |
| 18. HAS STAMINA; CAN KEEP GOING A LONG TIME. | | | | | | X | | | | | | | | |
| 19. HAS WIDE RANGE OF INFORMATION. | | | | | | | | | | X | | | | |
| 20. SHOWS ORIGINALITY. | | | | | | | | | X | | | | | |
| 21. ACCEPTS RESPONSIBILITIES. | | | | | | | X | | | | | | | |
| 22. ADMITS HIS ERRORS. | | | | | | | X | | | | | | | |
| 23. RESPONDS WELL TO SUPERVISION. | | | | | | | | X | | | | | | |
| 24. EVEN DISPOSITION. | | | | | | | | X | | | | | | |
| 25. ABLE TO DO HIS JOB WITHOUT STRONG SUPERVISION. | | | | | | | | | X | | | | | |

SECRET

SECTION V

Very broad knowledge of technical aspects in intelligence operations; enthusiasm and devotion to type of work he is doing.

Tendency to wander away from specific subjects during discussions because of the many vaguely related and remotely corollary situations he has experienced and/or learned about.

SECRET

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGHS ALL OTHER CONSIDERATIONS:

None

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION? ☒ NO ☐ YES. IF YES, WHY?

No

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?

None at present.

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A,B,C; & D.

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- ☐ 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
- ☐ 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
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IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA? ☒ NO ☐ YES. IF YES, WHAT?

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- ☐ 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE AGENCY... BOTHERED BY MINOR FRUSTRATIONS... WILL QUIT IF THESE CONTINUE.
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- ☒ 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE AGENCY... WILL PROBABLY NEVER CONSIDER WORKING ANYPLACE BUT IN THE AGENCY.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities normally indicated by promotion.

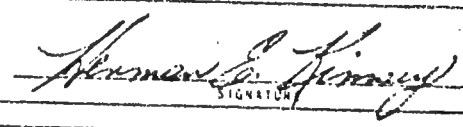
- ☐ 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- ☐ 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- ☐ 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
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D. DIRECTIONS: Consider everything you know about this person in making your rating... skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- ☐ 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- ☐ 2. OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- ☐ 3. A BARELY ACCEPTABLE EMPLOYEE... DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
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- ☐ 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- ☒ 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE AGENCY.
- ☐ 7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE AGENCY.

SECRET

SECRET
SECURITY INFORMATION

| PERSONNEL EVALUATION REPORT | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------|
| <i>Items 1 through 5 will be completed by Administrative or Personnel Officer</i> | | | | | |
| 1. NAME | (Last) | (First) | (Middle) | 2. GRADE | 3. POSITION TITLE |
| | KIMSEY | ROBERT | E. | (GS-7) | Tech. Projects Officer GS-7S |
| 4. OFFICE | STAGE OF DIVISION | | BRANCH | | 6. SPECIALTY, IF FIELD, SPECIAL STATION |
| DDP/100 | G-2 | | Office of Chief | | <input type="checkbox"/> FIELD |
| 5. PERIOD COVERED BY REPORT | | | 7. TYPE OF REPORT | | |
| From 23 Mar 53 To 22 Dec 53 | | | <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Annual <input type="checkbox"/> Special
<input type="checkbox"/> Reassignment <input type="checkbox"/> Reassignment of Supervisor | | |
| <i>Items 7 through 10 will be completed by the person evaluated</i> | | | | | |
| 7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES. | | | | | |
| a. Analyze foreign [redacted] for the purpose of [redacted]
b. Conduct a [redacted]
c. Conduct operational document analysis by comparing and identifying handwriting, typewriting, inks, paper, etc., for the purpose of establishing the authenticity or true source of the document.
d. Conduct research [redacted]
e. Maintain liaison with security-cleared government agencies and consultants engaged in document examination work. | | | | | |
| 8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD. | | | | | |
| Name of Course | | Location | | Length of Course | Date Completed |
| NONE | | | | | |
| 9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED? | | | | | |
| Intelligence Documentation. | | | | | |
| IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS). | | | | | |
| Not applicable. | | | | | |
| 10. | | | | | |
| <u>30 Mar 53</u>
DATE | | | 
SIGNATURE | | |
| <i>Items 11 through 14 will be completed by Supervisor</i> | | | | | |
| 11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE. | | | | | |
| <p>Mr. Kimsey is well qualified to perform all tasks assigned him and capable of greater responsibilities. He is mature, has broad experience in intelligence activities, is an excellent instructor, capable of clear self-expression. He has acquired a wealth of knowledge in the field of document intelligence through wide field experience, academic study, and instructional experience. A pleasing personality, good contact man. His manner of performance on duties assigned has been excellent.</p> | | | | | |

SECRET
SECURITY INFORMATION

| |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB MOST NOTICABLE? (NOTE OR OUTSTANDING?)</p> <p>Acceptance of responsibility, thoroughness, eagerness to try new techniques and ideas, cooperation.</p> |
| <p>13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR NEXT ASSIGNMENT?</p> <p>Wider knowledge of Graphic Arts mechanical techniques; exploration of new techniques in practical documentation.</p> |
| <p>14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE.</p> <p>Has capacity to handle greater responsibilities, especially in technical or associated training activities.</p> |
| <p>15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (If appropriate reassignment, if possible.)</p> <p>Possibly, at present feels he is performing valuable services to Agency which heretofore have received little support; changes in document reproduction and operational analysis, research.</p> |
| <p>16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON?</p> <p>None at present; continued widening of his present knowledge of advanced techniques in document examination and </p> |
| <p>17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE.</p> |
| <p>18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.</p> |
| <p style="text-align: center;">29 Dec 53
DATE</p> |
| <p>19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown below.)</p> <p style="text-align: center;">29 Dec 53
DATE</p> <p style="text-align: right;">C/GARD
IN OFFICE</p> |
| <p>20. COMMENTS: (If necessary, may be continued on reverse side of cover sheet.)</p> <p>Mr. Kinnear has proved of great value in his assignment. He is qualified for higher responsibilities in his specialties.</p> |

SECRET

NOV OF CHANGE IN HEALTH BENEFITS ENROLLMENT.
FEDERAL EMPLOYEES HEALTH BENEFITS ACT OF 1959

A. IDENTIFYING DATA

| | | |
|----------------------------------------------------------------------|-----------------------------------------|----------------------------------------|
| 1. NAME (LAST, FIRST, MIDDLE INITIAL)
Vinney, Herman E. | 2. DATE OF BIRTH
12/11/16 | 3. OFFICE CONTROL NO.
09/306 |
| 4. ADDRESS (NUMBER AND STREET)

(CITY AND ZONE NUMBER) (STATE) | 5. PAYROLL OFFICE NO.
1123901 | 6. ENROLLMENT CODE NO.
41 |
| 7. DATE ACTION BECOMES EFFECTIVE | | |

B. TERMINATION

☒ ENROLLMENT TERMINATED EFFECTIVE ON THE DATE SHOWN IN ITEM 7, ABOVE, WITH ELIGIBILITY TO CONVERT TO A HONORARIUM CONTRACT.

C. CHANGE IN PLAN

☐ ENROLLMENT SHOWN BY ITEM A ABOVE, HAS BEEN TERMINATED BECAUSE OF ELECTION OF ANOTHER PLAN.

D. TRANSFER OUT

E. TRANSFER IN

| | |
|--------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| NAME AND ADDRESS OF NEW PAYROLL OFFICE FOR RETIREMENT SYSTEM TO WHICH TRANSFERRING

<input type="checkbox"/> | ENROLLMENT ACCEPTED BY THIS AGENCY

<input type="checkbox"/> |
|--------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|

F. SUSPENSION

G. REINSTATEMENT

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
| ENROLLMENT HAS BEEN SUSPENDED EFFECTIVE ON DATE SHOWN IN ITEM 7, ABOVE, WHILE ENROLLEE IS ON ACTIVE MILITARY DUTY OR FOR THE REASON STATED IN REMARKS

<input type="checkbox"/> | ENROLLMENT HAS BEEN REINSTATED EFFECTIVE ON DATE SHOWN IN ITEM 7, ABOVE.

<input type="checkbox"/> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|

H. CHANGE IN NAME OF ENROLLEE

ENROLLMENT HAS BEEN CHANGED TO

☐

| | | |
|------|-----------------------------------------|---------------|
| NAME | ADDRESS IS DIFFERENT FROM ITEM A, ABOVE | DATE OF BIRTH |
|------|-----------------------------------------|---------------|

I. CHANGE IN ENROLLMENT — SURVIVOR ANNUITY

ENROLLMENT HAS BEEN CHANGED FROM FAMILY COVERAGE TO SELF ONLY

☐

NEW ENROLLMENT CODE NUMBER

J. REMARKS

7263 **71555**

K. DATE OF NOTICE

[Signature] DATE
HEALTH BENEFITS OFFICE Central Intelligence Agency
Washington, D.C.

QUADRUPLICATE To Enrolling Office

61555

BIOGRAPHIC PROFILE (PART 2)

KIMSEY, Herman Edward

Loc 1716

Fitness Report Dec 1957 - Jan 1959 -- "...is a very competent supervisor from a technical standpoint in that he has a thorough applicable knowledge of the complex A&R activities. In many respects this tends to contribute to his main weakness in that he measures the potential of his personnel by his own level of proficiency rather than a team level. This creates a situation whereby he has tendency to perform many functions which he could delegate to his personnel." Rater, [redacted] Reviewer, J. F. Marzen.

Fitness Report Jan 1959 - Jan 1960 -- "...thorough technical knowledge of A&R activities qualifies him as a competent Supervisor. Since the last reporting period, he has delegated more responsibilities to personnel under his supervision. This, in effect, has increased the productive capability of his Branch." Rater, P. J. Szego. Reviewer, J. F. Marzen.

Appreciation 1961 from Chief, NNA, for excellent work on Report G-145 performed by TSS personnel. Witnessed by Chief, CARO/TSS.

Commendation 1965 from the field, conveyed by the Career Management Officer, TSS, for efficiency in rendering support to an operation.

3 Jul 1960

OR/PAD LAR/issl

Return to 1 0 1 0

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KIRBY HESMAN EDWARD
Name: Last, First Middle

TO: All C. I. A. Personnel
FROM: Personnel Director
SUBJECT: PERSONNEL QUALIFICATION QUESTIONNAIRE

1. The Agency is currently revising the system for machine coding employee qualifications, thereby permitting more complete and accurate data on all personnel. The new system will aid in implementing Agency policies on promotion from within by facilitating the selection of personnel with desired education and experience for vacancies which may occur. It is also expected that the new system will provide readily accessible statistics for planning and management purposes.

2. The attached questionnaire is designed to cover adequately those factors in which the Agency is interested. Although the information is, in a large measure, already reflected in previous forms submitted by you, it is felt that your time within the organization may enable you to emphasize those qualifications pertinent to its needs. The questionnaire also serves to bring your education and qualifications record up to date.

3. Your cooperation is requested in completing the questionnaire as thoroughly and accurately as possible and returning it to your Administrative Officer within the time allotted.

CODED
FOR
QUALIFICATIONS
DATE 13 May 62

George E. Meloon
George E. Meloon
Personnel Director

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PERSONNEL QUALIFICATION QUESTIONNAIRE

| | | | |
|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-----------------------------------|
| 1. Serial No.
(no entry) | 2. NAME: (last) (first) (middle)
KIMBLEY HERMAN EDWARD | | 3. Office
GARD/TSS |
| 4. Date of Birth
11 Dec 1916 | 5. Sex: <input checked="" type="checkbox"/> male (1)
<input type="checkbox"/> female (2) | Martial Status <u>S</u>
Nr. Dependents <u>1</u> | 6. CIA Entry Date:
23 March 53 |
| 7. Citizenship:
<input checked="" type="checkbox"/> U.S.
<input type="checkbox"/> Other | 8. Acquired By: (1) <input checked="" type="checkbox"/> Birth (2) <input type="checkbox"/> Marriage (3) <input type="checkbox"/> Naturalization
(4) <input type="checkbox"/> Other(specify)
Year U.S. citizenship acquired, if not by birth _____ | | |

SEC. I. EDUCATION

1. Extent: (circle one)

1. Less than high school
2. High school graduate
3. Trade, Business or Commercial school graduate
4. GED
5. Two years college, or less
6. Over two years, no degree
7. Bachelor degree
8. Masters degree
9. Doctors degree
10. Post-graduate study (minimum 8 sem. hrs.)

2. College or University Study:

| Name and location of College or University | Major | Minor | Dates att'd | | Yrs Compl | | Degree Recd | | Sem Hrs |
|--------------------------------------------|-------|-------|-------------|----|-----------|-------|-------------|------|---------|
| | | | From | To | Day | Night | Title | Date | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

3. Trade, Commercial, and Specialized Training:

| School | Attendance Dates | | | Study or Specialization |
|--------|------------------|----|----------|-------------------------|
| | From | To | Tot.mo's | |
| | | | | |
| | | | | |

4. Military or Intelligence Training (full time duty as a student in specialized schools such as intelligence, communications, ordnance disposal, command & staff, etc.)

| School | Attendance Dates | | | Study or Specialization |
|----------------------------|------------------|---------|----------|----------------------------------------------|
| | From | To | Tot.mo's | |
| Counter Intelligence Corps | Mar-47 | May-47 | 2 1/2 | (MOS 1301)
Basic course for Special Agent |
| Instructor Guidance Course | Apr-52 | Apr-52 | 1 | Instructor, CIC School |
| Chemical Warfare School | Sept-47 | Sept-47 | | |
| | May-43 | June-43 | 1 1/2 | Gas Non Commissioned Officer |

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SEC. II. WORK EXPERIENCE

1. CIA Experience: State the specific nature of duties performed with CIA and CIG, starting with your present position. Take position titles from your official personnel papers, if you have personal copies. Please do not request your Official Personnel Folder. Include geographic area and subject matter dealt with, if applicable. Position Title is your classification title such as Geographer, Intelligence Officer, etc. Duty Title indicates your organization position such as - Section Chief, Branch Chief, Administrative Assistant, etc., and is to be filled in only if different to the Position Title. Approximate dates (month and year) are sufficient. Use a continuation sheet, if necessary, to adequately describe your duties.

| | |
|----------------------------------------------------------------|--------------------------------------------------------------------------|
| From <u>23 Mar 53</u> To <u> </u> Tot. mos. <u> </u> | Description of Duties: <u>Foreign Document Analyst and Tech. Advisor</u> |
| Grade <u>GS 9</u> Salary <u>\$5060.00</u> | |
| Office <u>GARD/TSS</u> | |
| Position <u> </u> | |
| Title: <u>Technical Projects Officer</u> | |
| Duty <u> </u> | |
| Title: <u>Technical Projects Officer</u> | Duty Station, if overseas: <u> </u> |
| From <u> </u> To <u> </u> Tot. mos. <u> </u> | Description of Duties: <u> </u> |
| Grade <u> </u> Salary <u> </u> | |
| Office <u> </u> | |
| Position <u> </u> | |
| Title: <u> </u> | |
| Duty <u> </u> | |
| Title: <u> </u> | Duty Station, if overseas: <u> </u> |
| From <u> </u> To <u> </u> Tot. mos. <u> </u> | Description of Duties: <u> </u> |
| Grade <u> </u> Salary <u> </u> | |
| Office <u> </u> | |
| Position <u> </u> | |
| Title: <u> </u> | |
| Duty <u> </u> | |
| Title: <u> </u> | Duty Station, if overseas: <u> </u> |
| From <u> </u> To <u> </u> Tot. mos. <u> </u> | Description of Duties: <u> </u> |
| Grade <u> </u> Salary <u> </u> | |
| Office <u> </u> | |
| Position <u> </u> | |
| Title: <u> </u> | |
| Duty <u> </u> | |
| Title: <u> </u> | Duty Station, if overseas: <u> </u> |

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SEC. II. WORK EXPERIENCE (CONT'D.)

2. Other than CIA: (Describe work experience for the last 15 years in sufficient detail to permit specific coding of your qualifications. Include military work experience. List last position first.) *See Military Work background Sec XVI*

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| From <u>May 46</u> To <u>Oct 46</u> Tot. mo's <u>5</u>
Classification Grade(if in Federal Service) <u>SP-7</u> Salary <u>\$3021.00</u>
Number and Class of Employees <u>100 laborers skilled</u>
Supervised: <u>100 laborers skilled</u>
Employer <u>U.S. Forest Service</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Forestry</u> | Exact Title of your position <u>Camp Supt.</u>
Description of Duties: <u>Timber disease control, fighting forest fires, camp administration (food, pay, project records, etc.)</u>
Duty Station if overseas: |
| From <u>Apr 45</u> To <u>Apr 46</u> Tot. mo's <u>12</u>
Classification Grade(if in Federal Service) <u>GPG 7</u> Salary <u>\$2694.96</u>
Number and Class of Employees <u>35 laborers</u>
Supervised: <u>35 laborers</u>
Employer <u>U. S. Forest Service</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>forestry</u> | Exact Title of your position <u>Camp Supt.</u>
Description of Duties: <u>Hazard Reduction project, fighting forest fires, camp administration, (food, pay, project records, etc.)</u>
Duty Station if overseas: |
| From <u>Oct 44</u> To <u>Apr 45</u> Tot. mo's <u>7</u>
Classification Grade(if in Federal Service) <u>none</u> Salary <u>\$1.10 per hr</u>
Number and Class of Employees <u>none</u>
Supervised: <u>none</u>
Employer <u>McCloud River Lbr. Co.</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Lumber</u> | Exact Title of your position <u>Brakeman</u>
Description of Duties: <u>Brakeman on Diesel loco.</u>
Duty Station if overseas: |
| From <u>June 44</u> To <u>Oct 44</u> Tot. mo's <u>4</u>
Classification Grade(if in Federal Service) <u>ferman.</u> Salary <u>\$90.00 per hr</u>
Number and Class of Employees <u>none</u>
Supervised: <u>none</u>
Employer <u>Brown Shasta Ranch.</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Horse racing and breeding</u> | Exact Title of your position <u>Laborer</u>
Description of Duties: <u>working with horses, cattle, and crops.</u>
Duty Station if overseas: |
| From <u>Dec 43</u> To <u>June 44</u> Tot. mo's <u>7</u>
Classification Grade(if in Federal Service) <u>none</u> Salary <u>\$90 per hr</u>
Number and Class of Employees <u>none</u>
Supervised: <u>none</u>
Employer <u>McCloud River Lbr. Co.</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>lumber</u> | Exact Title of your position <u>laborer</u>
Description of Duties: <u>Handle lumber & Operate machinery.</u>
Duty Station if overseas: |

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Security Information

Sec. II, Par. 2.

From 19 May 1941 to 5 November 1943 Total Months 30
Military Service

From 5 Oct 1940 to 10 May 1941 Total months 7.
 Classification grade (if in Federal Service) --- Salary --- .75 per hr
 Number and class of employees supervised --- None
 Employer --- McCloud River Lumber Co.
 Kind of Business --- Lumber
 Exact Title of your position --- Brakeman
 Description of Duties --- Brakeman on a diesel locomotive.
 Duty Station if Overseas ---

From 1 May 1940 to 1 Oct 1940 Total Months 5
 Class. Grade (if in Federal Service) NAK Salary \$100.00 per mo.
 Number and Class of Employees Supervised 10-20 laborers

Employer US Forest Service
 Kind of Business Forestry
 Exact Title of your position Forest Guard
 Description of your duties Suppression and prevention of Forest
Fires, enforcement of Forest Laws, & maintenance of Forest & equip.
 Duty station if overseas

From 1 Oct 1939 to 1 May 1940 Total months 7
 Class. Grade (if in Federal Service) Salary 0.65 per hr.
 Number and class of employees supervised None

Employer McCloud River Lumber Company
 Kind of Business Lumber
 Exact Title of your position Brakeman
 Description of your duties Brakeman on diesel locomotive
 Duty station if overseas

From 1 May 1939 to 1 Oct 1939 Total Months 5
 Class. Grade (if in Federal Service) NAK Salary \$100.00 per month.
 Number and class of employees supervised 10-20 laborers

Employer US Forest Service
 Kind of business Forestry
 Exact title of your position Forest Guard
 Description of your duties Suppression and prevention of Forest
fires, enforcement of Forest Laws, & maintenance of Forest & Equip
 Duty station if overseas

Sec II, Par. 2.

From 1 Jan 1932 To 1 May 1932 Total Months 4
 Class. Grade (if in Federal Service) _____ Salary 0.94 per hr
 Number and class of Employees supervised None
 Employer Wetland River Lumber Company
 Kind of business Lumber
 Exact Title of your position Brakeman
 Description of your duties Brakeman on a diesel locomotive
 Duty station if overseas _____

From 1 Oct 1932 To 1 Jan 1933 Total Months 3
Unemployed

From May 1933 To 1 Oct 1933 Total Months 5
 Class. Grade (if in Federal Service) _____ Salary 150.00 per mo.
 Number and class of Employees supervised None
 Employer Union Oil Company
 Kind of business Oil
 Exact Title of your position Relief tank-truck salesman.
 Description of your duties Sale and delivery of oil & gasoline to stations.
 Duty station if overseas _____

From Feb 1935 To April 1935 Total months 3⁸
 Class. Grade (if in Federal Service) _____ Salary 0.50 per hr
 Number and class of employees supervised None
 Employer Wetland River Lumber Company
 Kind of business Lumber
 Exact title of your position Brakeman
 Description of your duties Brakeman on diesel locomotive.
 Duty station if overseas _____

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SEC. II. WORK EXPERIENCE (CONT'D)

3. Special Work Experience: Check any of the following organizations by which you may have been employed.

- | | |
|----------------------------------------------------------------------|-------------------------------------------------------------------|
| 01 <input type="checkbox"/> U.S. Secret Service | 24 <input type="checkbox"/> Air Force A-2 |
| 02 <input checked="" type="checkbox"/> Civil Police (Forest Service) | 25 <input type="checkbox"/> Foreign Economic Admin. |
| 03 <input type="checkbox"/> Military Police | 26 <input checked="" type="checkbox"/> Counter Intelligence Corps |
| 04 <input type="checkbox"/> U.S. Border Patrol | 27 <input type="checkbox"/> Immigration & Naturalization |
| 05 <input type="checkbox"/> U.S. Narcotics Squad | 28 <input type="checkbox"/> Strategic Services Unit |
| 06 <input type="checkbox"/> FBI | 29 <input type="checkbox"/> Foreign Service, State Dept. |
| 07 <input type="checkbox"/> Criminal Investigation Div. | 30 <input type="checkbox"/> Central Intelligence Group |
| 21 <input type="checkbox"/> Office of Naval Intelligence | 31 <input type="checkbox"/> Armed Forces Security Agency |
| 22 <input type="checkbox"/> Office of War Information | 32 <input type="checkbox"/> Coordinator of Information |
| 23 <input type="checkbox"/> Army G-2 | 33 <input type="checkbox"/> Office of Facts & Figures |
| 20 <input type="checkbox"/> Office of Strategic Services | 34 <input type="checkbox"/> Board of Economic Warfare |
| | 35 <input type="checkbox"/> Federal Communications Comm. |

SEC. III. FOREIGN LANGUAGES

List below the foreign languages in which you have some competence. Be sure to include uncommon modern languages. Check (X) your competence and how acquired.

| LANGUAGE | COMPETENCE | | | | | | HOW ACQUIRED | | | | |
|-----------------|--------------------------------|--------------------------------|--------------------------|---------------------|-------------------|-------------------------------------|-------------------|----------------------|-------------------------------------|-------------------------|------------------------------------|
| | Equivalent to Native Fluency * | Fluent but obviously Foreign * | Adequate for Research ** | Adequate for Travel | Limited Knowledge | Knowledge <i>Slight</i> | Native of Country | Prolonged Occupation | Residence <i>CLC, 2 year</i> | Contact (Parents, etc.) | Academic Study (Inc. CIA training) |
| <i>JAPANESE</i> | | | | | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
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| | | | | | | | | | | | |

* If you have checked 'Fluent' for a language that has significant difference in spoken and written form (e.g., Arabic), explain your competence herein _____

**Specialized Language Competence: Describe ability to do specialized language work involving vocabularies and terminology in the scientific, engineering, telecommunications, and military fields. List the language with the type of speciality. _____

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SEC. IV. AREA KNOWLEDGE

1. List below any foreign countries or regions of which you have knowledge gained as a result of residence, travel or study. Study can mean either academic study, or study of a foreign country resulting from an intelligence, military, commercial or professional work assignment.

| Country or Region | Dates of Residence, Study Etc. | Manner in Which Knowledge Was Acquired (check (X) one) | | |
|-------------------|--------------------------------|--------------------------------------------------------|---------|-------|
| | | Residence | Travel | Study |
| Japan | 1948-1949 | OCCUPATION
X | | |
| | 1950-1950 | X | | |
| | 1951-1951 | X | | |
| Korea | 1950-1951 | | X (war) | |

2. Specialized Knowledge of Area

List specialized knowledge of foreign country such as knowledge of terrain, coasts and harbors, utilities, railroads, industries, political parties, etc., gained as a result of study or work assignment. Include name of employer or organization.

| Country | Type of Knowledge | How and When Gained |
|---------|-------------------|---------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

SEC. V. TYPING AND STENOGRAPHIC SKILLS (PRESENT UTILIZATION)

| Skill | Per Cent of Time Used | Not Used | WPM (Approximate Proficiency) | Prefer Assignment Using Skill Oftener |
|---------------------------------------------------------|-----------------------|----------|-------------------------------|---------------------------------------|
| Typing | 1. | 2. | | 1. Yes 2. No |
| Shorthand | 1. | 2. | | 1. Yes 2. No |
| Shorthand System: 1. Manual 2. Machine 3. Speedwriting. | | | | |

SEC. VI. LICENSES, HOBBIES, SPECIAL QUALIFICATIONS

| | |
|---------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| 1. Licenses: List any licenses or certification such as teachers, pilot, marine, etc. _____ | 2. Hobbies: List any hobbies such as sailing, skiing, writing, or other special qualifications: _____ |
| | Horses, swimming, archery, boating, photography, and weapons. |

SEC. VII. PROFESSIONAL AND ACADEMIC HONORS

| |
|----------------------------------------------------------------------------------------------------------|
| List any professional or academic associations or honorary societies in which you hold membership. _____ |
| International Assn. For Identification |
| Youngstown, Ohio |
| |
| |

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SEC. VIII. PUBLICATIONS

List below the type of writing (non-fiction: professional or scientific articles, general interest subjects, current events, etc; fiction: novels, short stories, etc.) of any published materials of which you were author or co-author.

| |
|-------------------------------------------------------------------|
| Co-author of 2 text books at the Counter Intelligence Corp School |
| Observation and Description |
| Physical Evidence |
| Co-author of the CIC Investigator. A handbook for CIC Agents. |

SEC. IX. INVENTIONS

Describe any devices you have invented as to type of work for which intended and whether patented.

| Device | Patented | |
|--------|----------|--------|
| | (1) Yes | (2) No |
| | (1) Yes | (2) No |
| | (1) Yes | (2) No |

SEC. X. CIA TESTS

Describe below the type of tests which you have taken in CIA:

| Type of Test | Date Taken |
|-------------------------------|------------|
| Personnel Qualification Tests | Nov 1969 |
| | |
| | |

SEC. XI. PHYSICAL HANDICAPS

List any physical handicaps you may have.

| |
|--|
| |
| |
| |
| |

SEC. XII. OVERSEAS ASSIGNMENT

Are you willing to accept periodic tour of duty overseas?

| | | |
|-----------------------------------------------------|-----------------------------------------------------|---------------------------------------------|
| (1) 2 year Tour <input checked="" type="checkbox"/> | (2) 4 year Tour <input checked="" type="checkbox"/> | (3) Not interested <input type="checkbox"/> |
|-----------------------------------------------------|-----------------------------------------------------|---------------------------------------------|

SEC. XIII. WORK ASSIGNMENT

In view of your total experience and education, for what assignment in CIA do you think you are best qualified?

| |
|--------------------------------------------------------------------|
| Operational or Instruction. The candidate has experience in Super- |
| visor, capable of working in Organization |
| |
| |
| |

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SEC. XIV. MILITARY STATUS

1. **Present Draft Status**
Have you registered under the Selective Service Act of 1948? Yes ☒ No ☐
If yes, indicate your present draft classification _____

2. **Present Reserve or National Guard Status**
Do you now have Reserve or National Guard Status Yes ☒ No ☐
If yes, complete the following.

1. National Guard
2. Air National Guard
3. Active Reserve Status (member of organized unit)
4. Inactive Reserve Status

Service _____ Grade _____ Location _____

Reserve Unit with which currently affiliated _____

Service Mobilization Assignment, if any _____

Location of Service Records, if known _____

SEC. XV. CIA TRAINING

List the training courses or subjects you have taken while in the CIA.

| Course or Subject | (from) Dates (to) | Hours |
|-------------------|-------------------|-------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

SEC. XVI. REMARKS

Use this space to indicate any other qualifications you may have which you do not describe above. (Military Service-12 April-5 May 43, 22 May 46-3 Oct 42, 20 Nov 42-12 Dec 42)

Considerable study in Applied Psychology, Criminology, and Criminal Investigative Techniques. Delivered over 1500 hours of lecture on these subjects. Two (2) years experience in supervising an investigative type laboratory which specialized in document examination. Number of personnel, five (5). Two (2) years experience as Special Agent, CIC.

Total of Six (6) years in CIC. Highest rank, Master Sergeant

Permanent MOS 1301

One (1) year experience with S-2 Section, Combat Intelligence, Interpretation and Evaluation of Information.

Three (3) years of general military training with emphasis on communications.

Infantry, Infantry Troops, Tank Destroyers, Field Artillery.

DATE 7 April 53

SIGNATURE Edward J. [Signature]

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CERTIFICATE OF ATTENDANCE

MAR 30 1953

I certify that on _____ I have attended
(DATE)
the Agency Indoctrination Course specified by Regulation
25-1.

Norman E. Kewey
(NAME)

FORM NO. 51-121
DEC 1951

(6)

APPOINTMENT AFFIDAVITS

IMPORTANT.—Before swearing to these appointment affidavits, you should read and understand the attached information for appointees.

CIA

(Department or agency)

(Bureau or division)

(Place of employment)

I, Herman E. Kinsey, do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

23 March 1953

(Date of entrance on duty)

Herman E. Kinsey
(Signature of appointee)

Subscribed and sworn before me this 23rd day of March, A. D. 19 '53,

at Washington D.C.

(City)

(State)

[SEAL]

5 USC 16 & 16a

(Title)

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

16-52100-8

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PRESENT ADDRESS (street and number, city and State) Hotel Vivian, 1763 G St. N.W., Washington, D.C.

2. (A) DATE OF BIRTH 11 Dec. 1916 (B) PLACE OF BIRTH (city or town and State or Country) Gallup, New Mexico

3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY (B) RELATIONSHIP (C) STREET AND NUMBER, CITY AND STATE (D) TELEPHONE NO.

Brother Box 185 Yes
Mr. C. C. C. Calif.

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (FATHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? ☐ YES ☒ NO

If so, for each such relative fill in the blanks below. If additional space is necessary, complete under item 10.

| NAME | PRESENT ADDRESS (Give street number, if any) | (1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED | RELATIONSHIP | MARRIED (Check one) | SINGLE |
|------|----------------------------------------------|------------------------------------------------------------------------------|--------------|--------------------------|--------------------------|
| | | 1. _____ | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | 2. _____ | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | 3. _____ | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | 1. _____ | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | 2. _____ | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | 3. _____ | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | 1. _____ | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | 2. _____ | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | 3. _____ | | <input type="checkbox"/> | <input type="checkbox"/> |

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN

| | YES | NO | ITEM NO. | WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|----------|-----------------------------------------------------------------------|
| 5. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES? | X | | | |
| 6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? | | X | | |
| If your answer is "Yes", give details in Item 10. | | | | |
| 7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? | | X | | |
| If your answer is "Yes", give in Item 10 reason for retirement, that is, age, optional disability, or by reason of voluntary or involuntary separation after 5 years' service; amount of retirement pay, and under what retirement act; and rating, if retired from military or naval service. | | | | |
| 8. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT HAVE YOU BEEN DISCHARGED, OR FORCED TO RESIGN, FOR MISFEASANCE OR UNSATISFACTORY SERVICE FROM ANY POSITION? | | X | | |
| If your answer is "Yes", give in Item 10 the name and address of employer, date and reason in each case. | | | | |
| 9. HAVE YOU BEEN APPREHENDED (NOT INCLUDING TRAFFIC VIOLATIONS FOR WHICH YOU WERE FINEDED OR LESS, OR ADMITTED GUILTY OF SUCH VIOLATIONS) SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT? | | X | | |
| If your answer is "Yes", list all such cases under Item 10. Give in each case: (1) The date, (2) the nature of the offense or violation, (3) the name and location of the court, (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken. | | | | |

INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine in his own mind whether the appointment would be in conformity with the Civil Service Act, applicable Civil Service Rules and Regulations and acts of Congress pertaining to appointments.

This form should be checked for holding of office, pension, entitling in connection with any record of recent discharge or arrest, and particularly for the following:

(1) *Identity of appointee*—It is the duty of the appointing officer to guard against impersonation and to determine beyond reasonable doubt that the appointee is the same person whose appointment was requested. The appointee's signature and handwriting are to be compared with the application and other pertinent papers. If the appointee qualified in a written examination, the signature on this form should be compared with the signature on the declaration sheet, which was signed in the examination room. His physical appearance may be compared against the physical description. The appointee may be questioned as to his personal history for agreement with his previous statements.

(2) *Age*—If definite age limits have been established for the position, it should be determined that applicant is not outside the age range for appointment. Until such determination is made, the appointment may not be consummated.

(3) *Citizenship*—The appointing officer is responsible for observing the citizenship provisions of (1) the Civil Service Rules and (2) appointments in Item 61 constitutes an affidavit for both purposes and is acceptable proof of citizenship status in the absence of conflicting evidence. In doubtful cases the appointing officer should not be constrained until clearance has been secured from the recruiting office of the Civil Service Commission.

(4) *Members of Family*—Section 9 of the Civil Service Act provides that whenever there are closely two or more members of a family setting under probationary or permanent appointment in the competitive service, no other member of such family is eligible for probationary or permanent appointment in the competitive service. The appointments of persons entitled to veteran preference are subject to this requirement. The members of family provision does not apply to temporary appointments. Doubtful cases may be referred to the appropriate office of the Civil Service Commission for decision.

STATEMENT OF PRIOR FEDERAL AND MILITARY SERVICE

IMPORTANT: The information on this form will be used in determining creditable service for *leave purposes* and retention credits for *reduction in force*. The employee should complete Part I and the Personnel Office should complete Parts II through IV.

PART I.—EMPLOYEE'S STATEMENT

PART II—THIS COLUMN IS FOR PERSONNEL OFFICE USE

| | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|----------------------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------|----|
| 1. NAME (Last, first, middle initial)
<u>Kimsey, Herman E.</u> | | 2. DATE OF BIRTH
<u>11 Dec 1916</u> | | 3. RETENTION GROUP | |
| 3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENT (Do not include military service) | | | | 10. CDS STATUS (For <i>PERSONNEL</i> employees only)
<input type="checkbox"/> YES <input type="checkbox"/> NO | |
| NAME AND LOCATION OF AGENCY | FROM—
YEAR MONTH DAY | TO—
YEAR MONTH DAY | TYPE OF APPOINTMENT
(If known) | 11. SERVICE
YEAR MONTH DAY | |
| U.S. Forest Service | 1934 Jan 1 | 1937 Oct 10 | See attached | 5 | 10 |
| U.S. Forest Service | 1940 May 14 | 1941 Oct 15 | | 6 | 27 |
| U.S. Forest Service | 1941 May 28 | 1942 May 15 | | 11 | 24 |
| U.S. Forest Service | 1942 May 28 | 1943 May 27 | | 4 | 24 |
| CIA | 53 Mar 23 | | | | |
| 4. LIST PERIODS OF SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES, IF YOU HAD NO MILITARY SERVICE, WRITE "NONE." | | | | | |
| BRANCH | FROM—
YEAR MONTH DAY | TO—
YEAR MONTH DAY | DISCHARGE
(How or dishon?) | | |
| Army | 1941 May | 1942 May 29 | Hon. | 2 | 5 |
| Army | 1942 May 29 | 1943 Oct 8 | Hon. | 2 | 10 |
| Army | 1943 Oct 8 | 1944 May 29 | Hon. | 3 | 2 |
| 5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF ANSWER IS "YES," LIST FOLLOWING INFORMATION. | | | | 12. TOTAL SERVICE
<u>10</u> <u>7</u> <u>13</u> | |
| TYPE IF KNOWN
(LWOP, Furl, Susp, AWOL, Mor Nat) | FROM—
YEAR MONTH DAY | TO—
YEAR MONTH DAY | TOTAL
YEARS MONTHS DAYS | 13. NONCREDITABLE SERVICE
(Leave purposes only) | |
| Furlough | 1939 Oct 1 | 1940 May 1 | 7 | 14. NONCREDITABLE SERVICE
(RIF purposes only) | |
| 6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS?
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
(If answer is "Yes," in what agency were you employed at the time status was acquired) | | | | 15. REEMPLOYMENT RIGHTS
<input type="checkbox"/> YES <input type="checkbox"/> NO | |
| 7. ARE YOU:
A. THE WIFE OF A DISABLED VETERAN? <input type="checkbox"/> YES <input type="checkbox"/> NO
B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? <input type="checkbox"/> YES <input type="checkbox"/> NO
C. THE UNMARRIED WIDOW OF A VETERAN? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | 16. RETENTION RIGHTS
<input type="checkbox"/> YES <input type="checkbox"/> NO | |
| 8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS.
I swear (or affirm) that the above statements are true to the best of my knowledge and belief. | | | | 17. EXPIRATION DATE OF RETENTION RIGHTS | |

23 March 53
(DATE)

Herman E. Kimsey
(SIGNATURE)

Subscribed and sworn to before me on this 23 day of March 1953 at Wood DC
(COUNTY) (STATE)

SEAL

NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.

(OVER)

**PART III.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
LEAVE PURPOSES**

TOTAL SERVICE (Item 12)

NONCREDITABLE SERVICE (Item 13)

CREDITABLE SERVICE (Leave purposes)

| YEARS | MONTHS | DAYS |
|-------|--------|------|
| | | |
| | | |
| | | |

ENTRANCE ON DUTY DATE (Present agency)

LESS CREDITABLE SERVICE (Leave purposes)

SERVICE COMPUTATION DATE (Leave purposes)

| | | |
|----|----|----|
| 53 | 3 | 27 |
| 10 | 3 | 18 |
| 42 | 12 | 3 |

**PART IV.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
REDUCTION IN FORCE PURPOSES**

(To be completed only in those cases when the amount of creditable service for reduction
in force purposes differs from the amount creditable for leave purposes)

TOTAL SERVICE (Item 12)

NONCREDITABLE SERVICE (Item 13)

CREDITABLE SERVICE (RIF purposes)

ENTRANCE ON DUTY DATE (Present agency)

LESS CREDITABLE SERVICE (RIF purposes)

SERVICE COMPUTATION DATE (RIF purposes)

(Enter as the "service computation date" on the employee's "Service Record Card," SP-7)

| YEARS | MONTHS | DAYS |
|-------|--------|------|
| | | |
| | | |
| | | |

| | | |
|--|--|--|
| | | |
| | | |
| | | |

REMARKS:

CONFIDENTIAL
SECURITY INFORMATION
SECURITY APPROVAL

Date: 6 Feb. 1953

TO: Chief, Covert Personnel Division

T.S.S.-#5
Your Reference: I-2594

FROM: Chief, Security Division

Case Number: 71129

SUBJECT: KIMSEY, Herman Edward

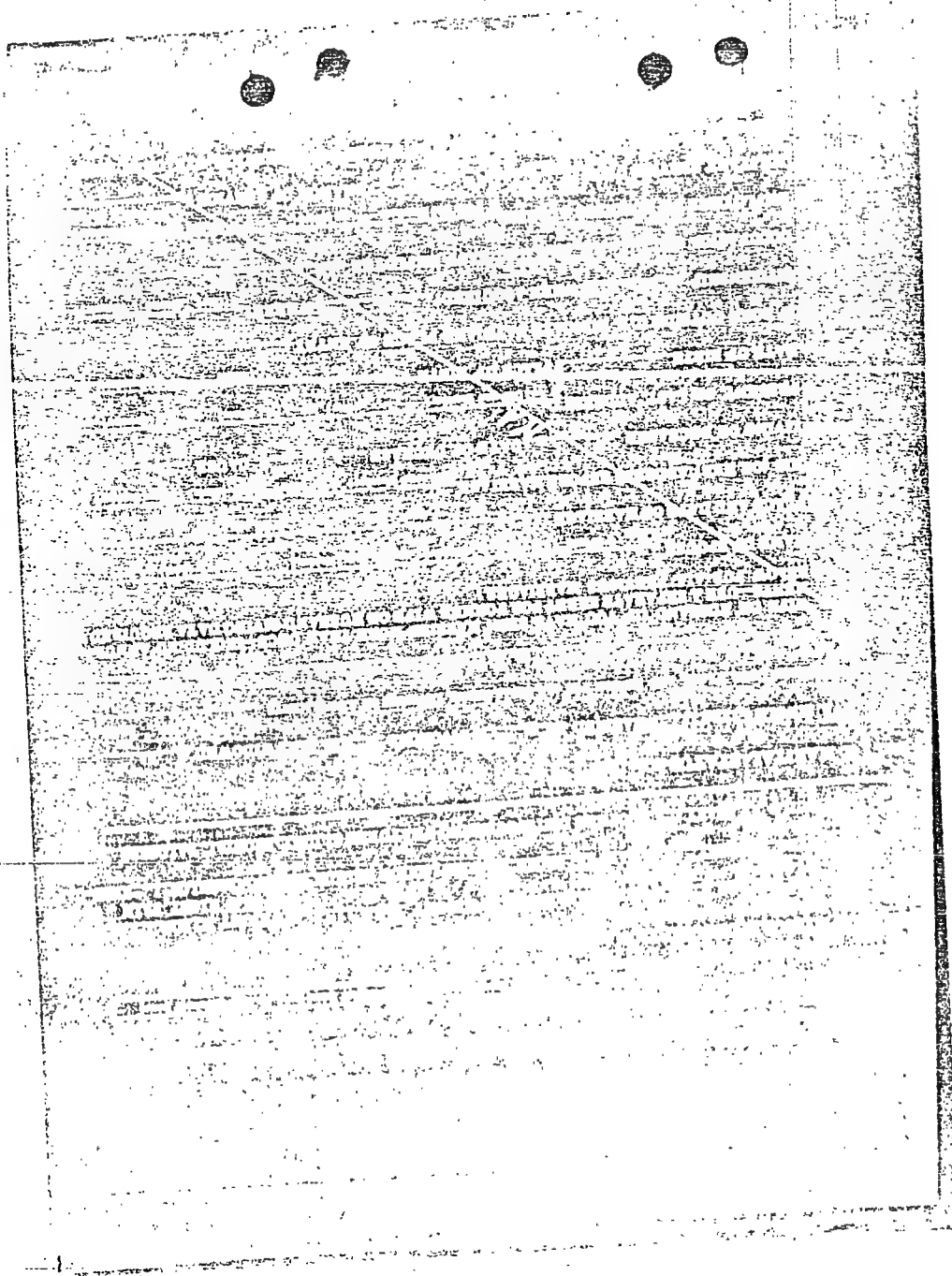
1. This is to advise you of security action in the subject case as indicated below:
 - ☒ Security approval is granted the subject person for access to classified information.
 - ☐ Provisional clearance for full duty with CIA is granted under the provisions of Paragraph D of Regulation 10-9 which provides for a temporary appointment pending completion of full security investigation.
 - ☐ The Director of Central Intelligence has granted a provisional clearance for full duty with CIA under the provisions of paragraph H of Regulation 10-9.
2. Unless the subject person enters on duty within 60 days from the above date, this approval becomes invalid.
3. Subject is to be polygraphed as part of the E.O.D. procedures.

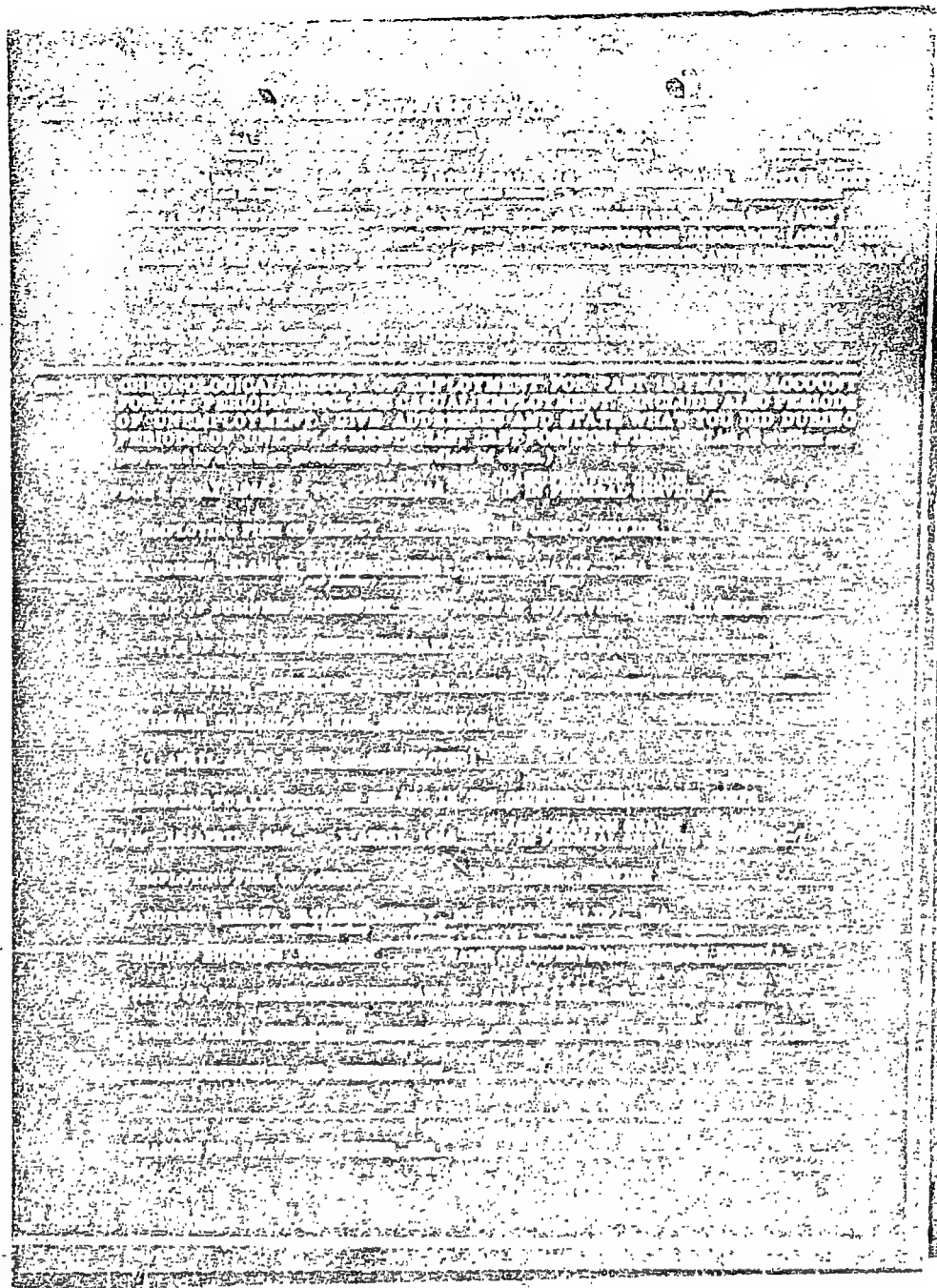
up down
E. P. Geiss

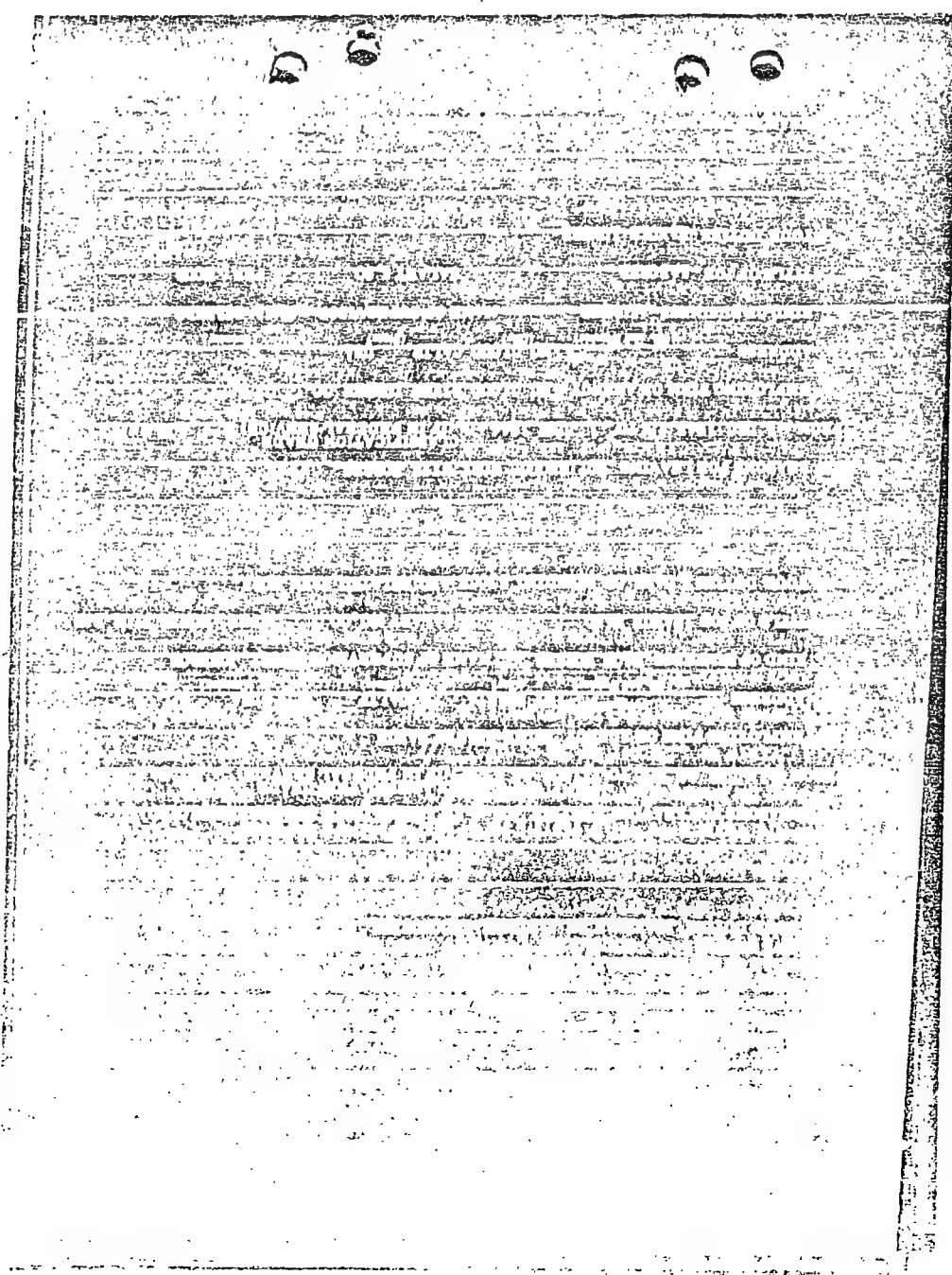
JAX
CONFIDENTIAL

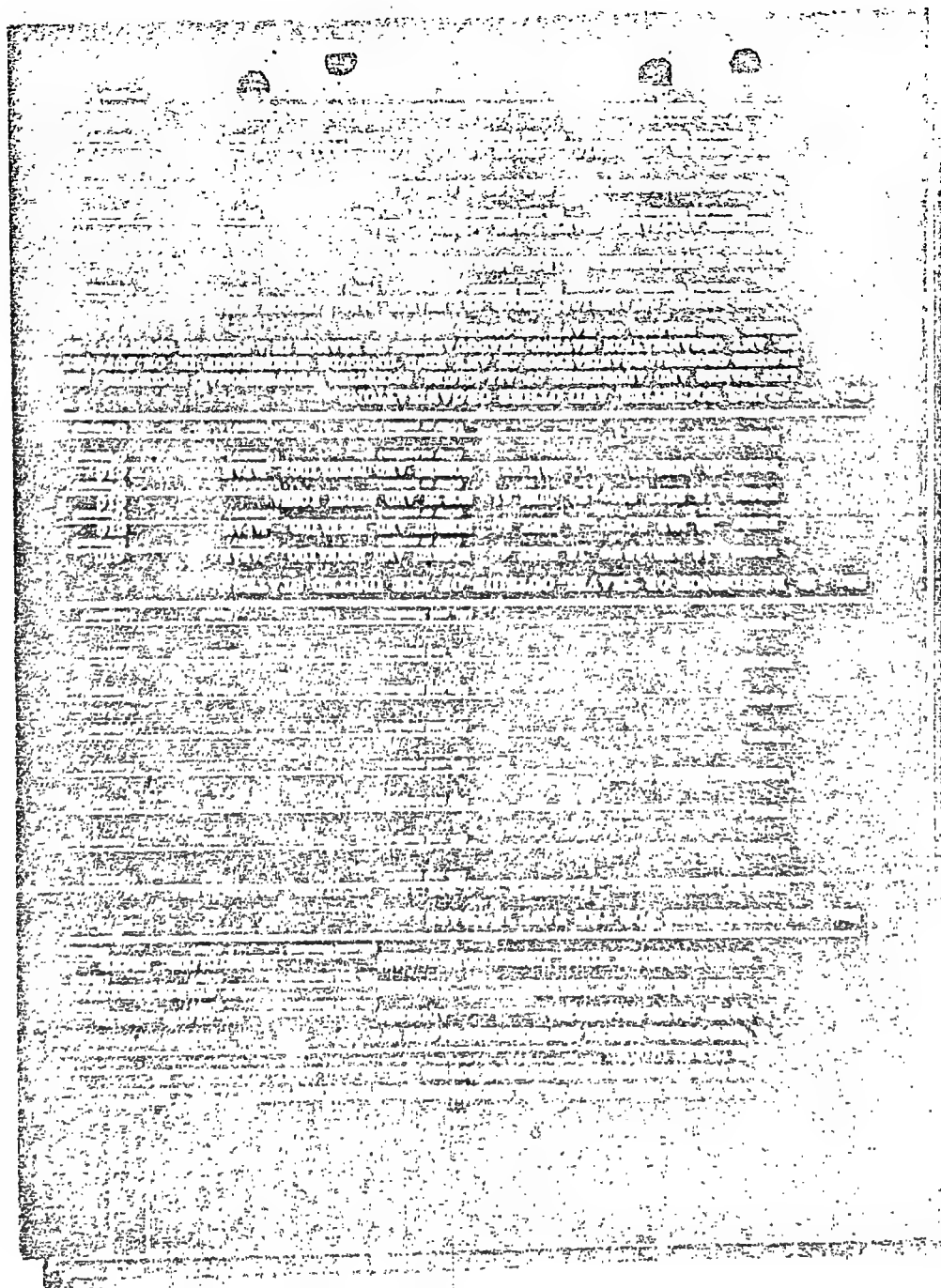
1943-1944

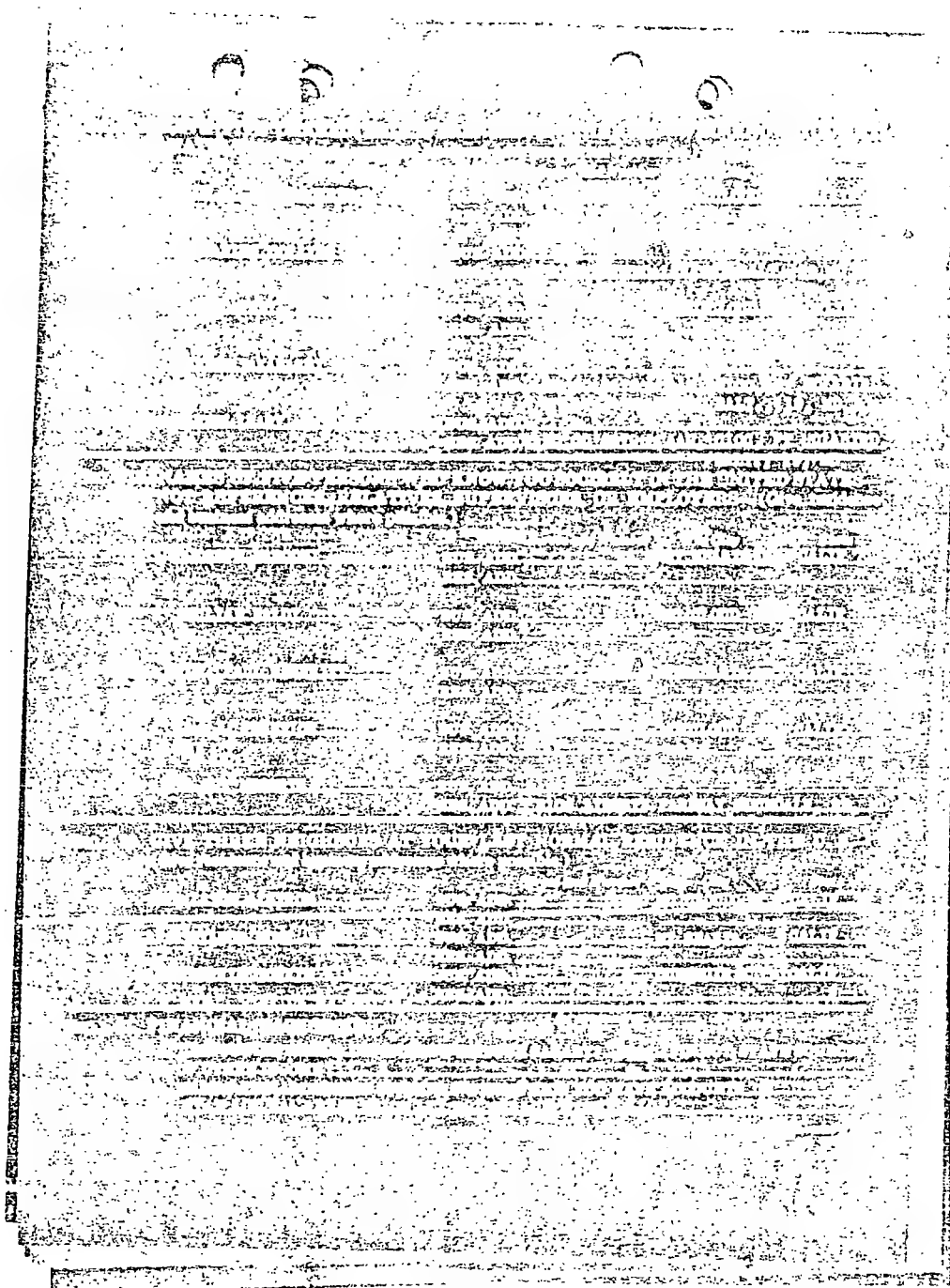
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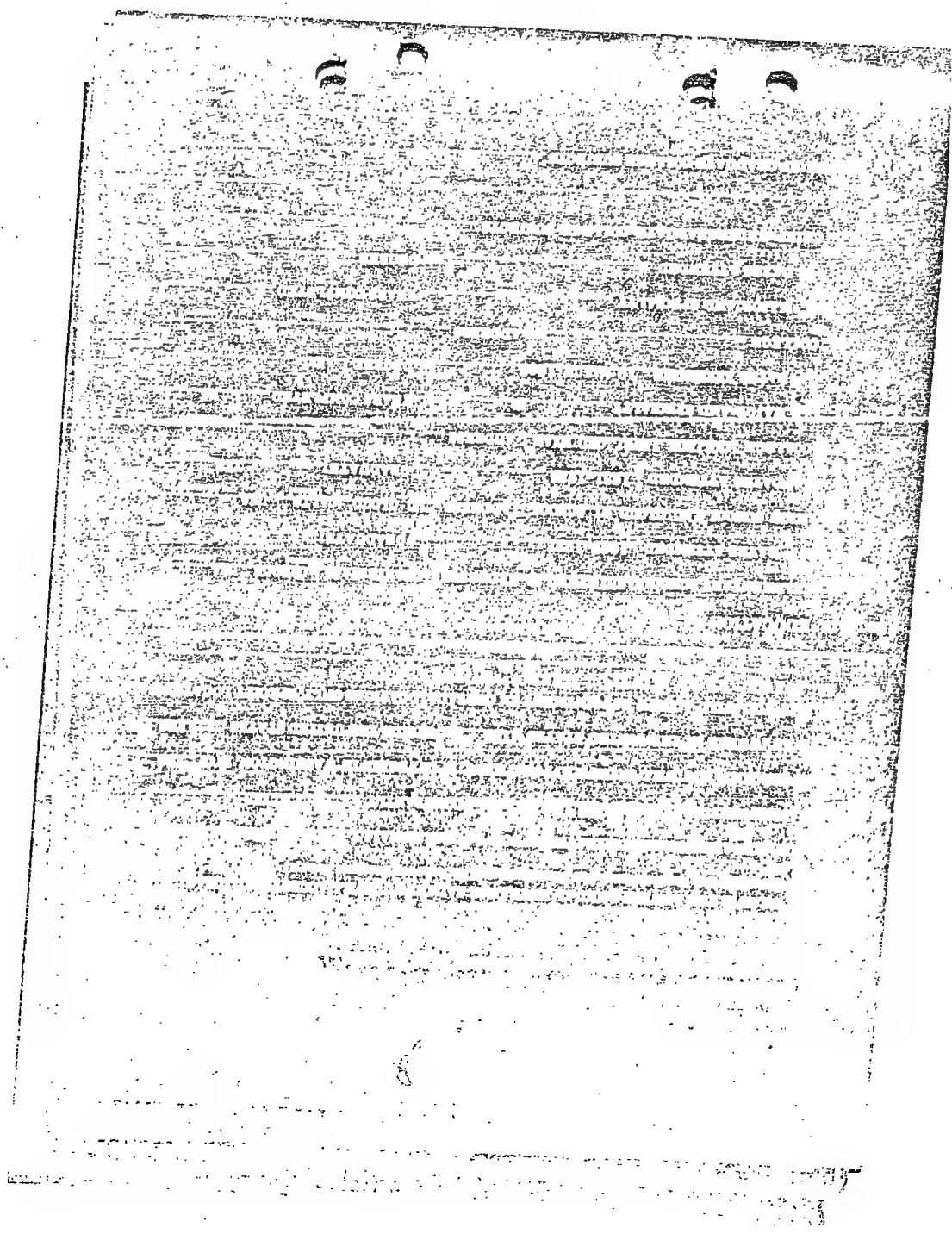


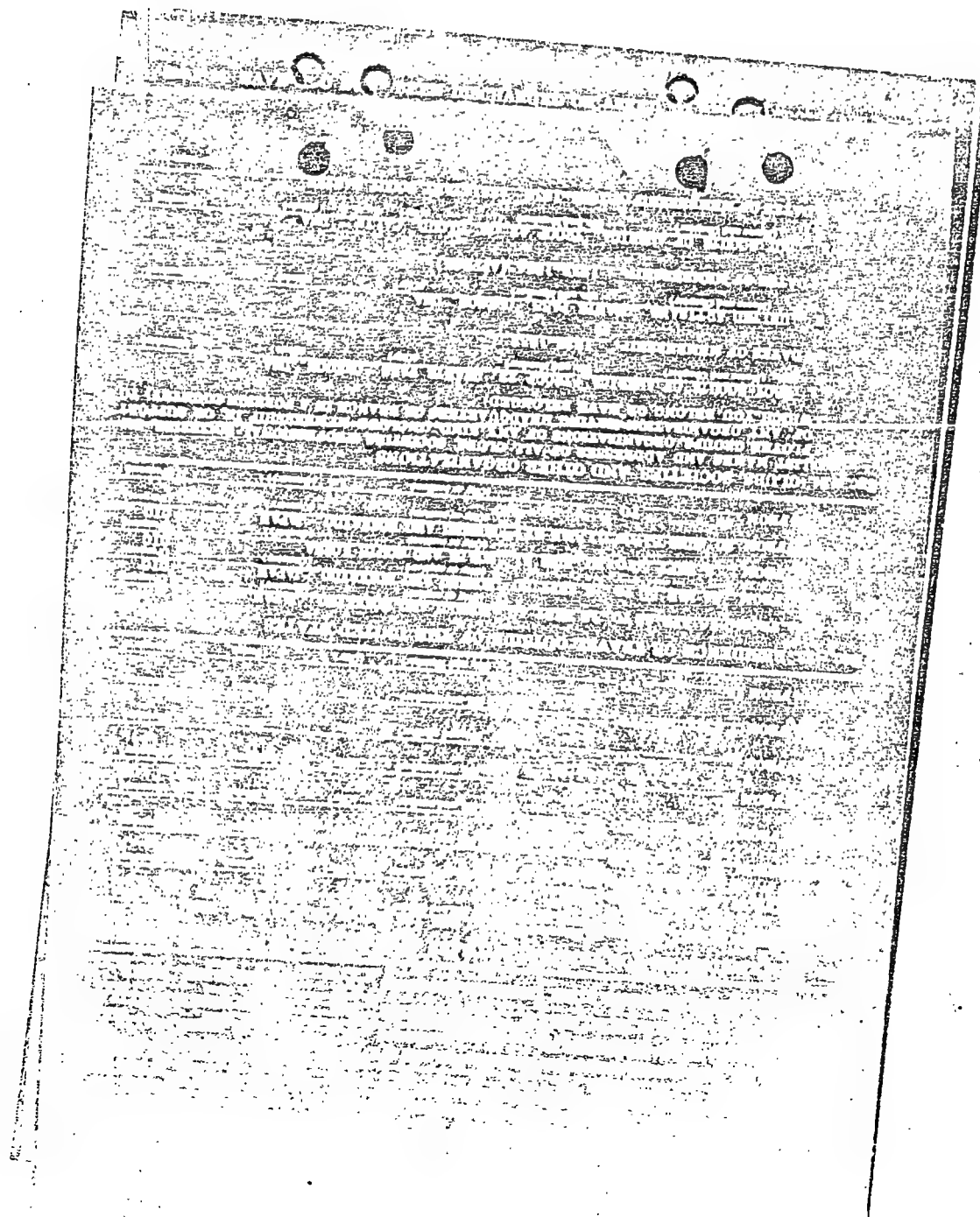


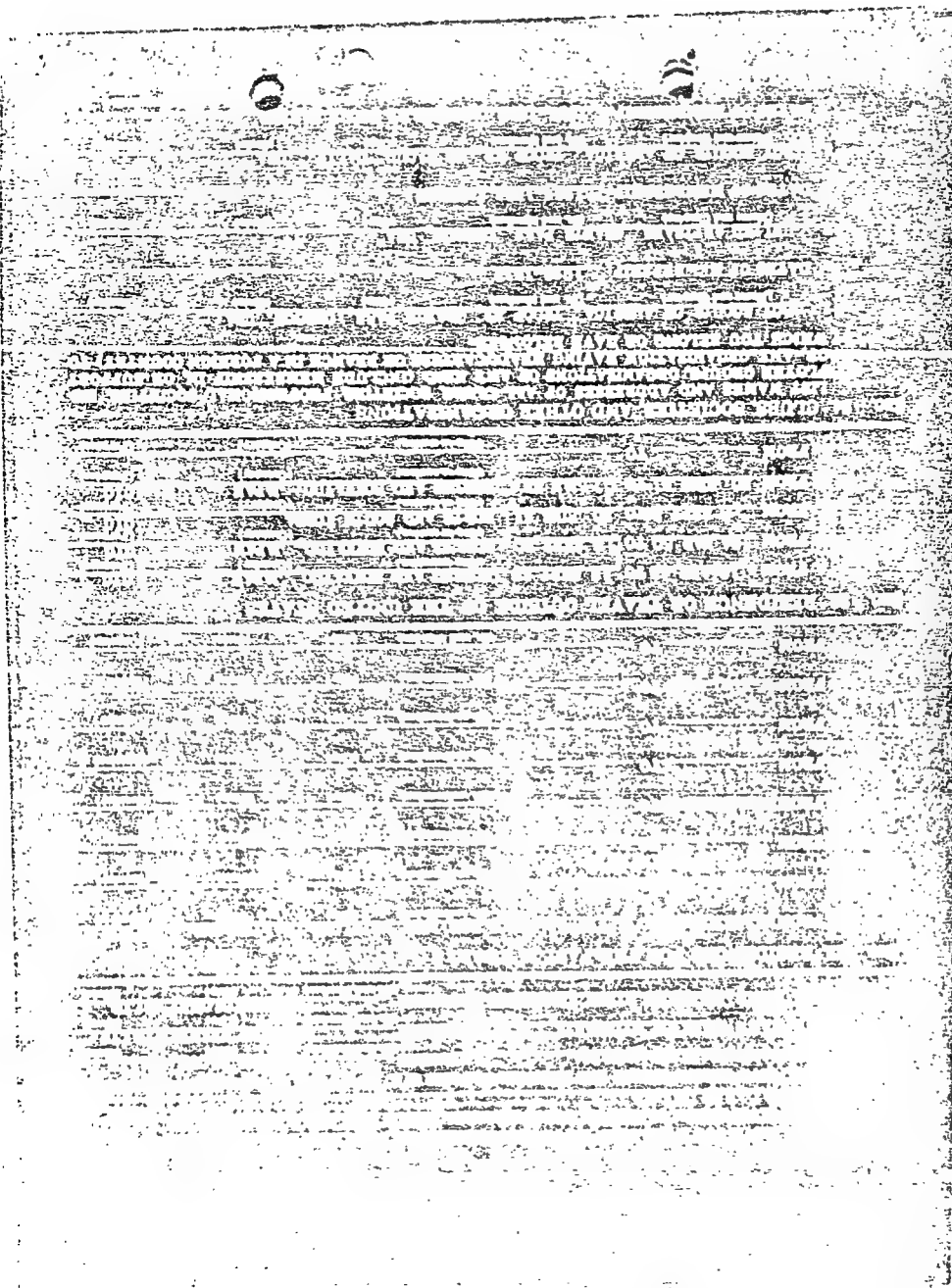


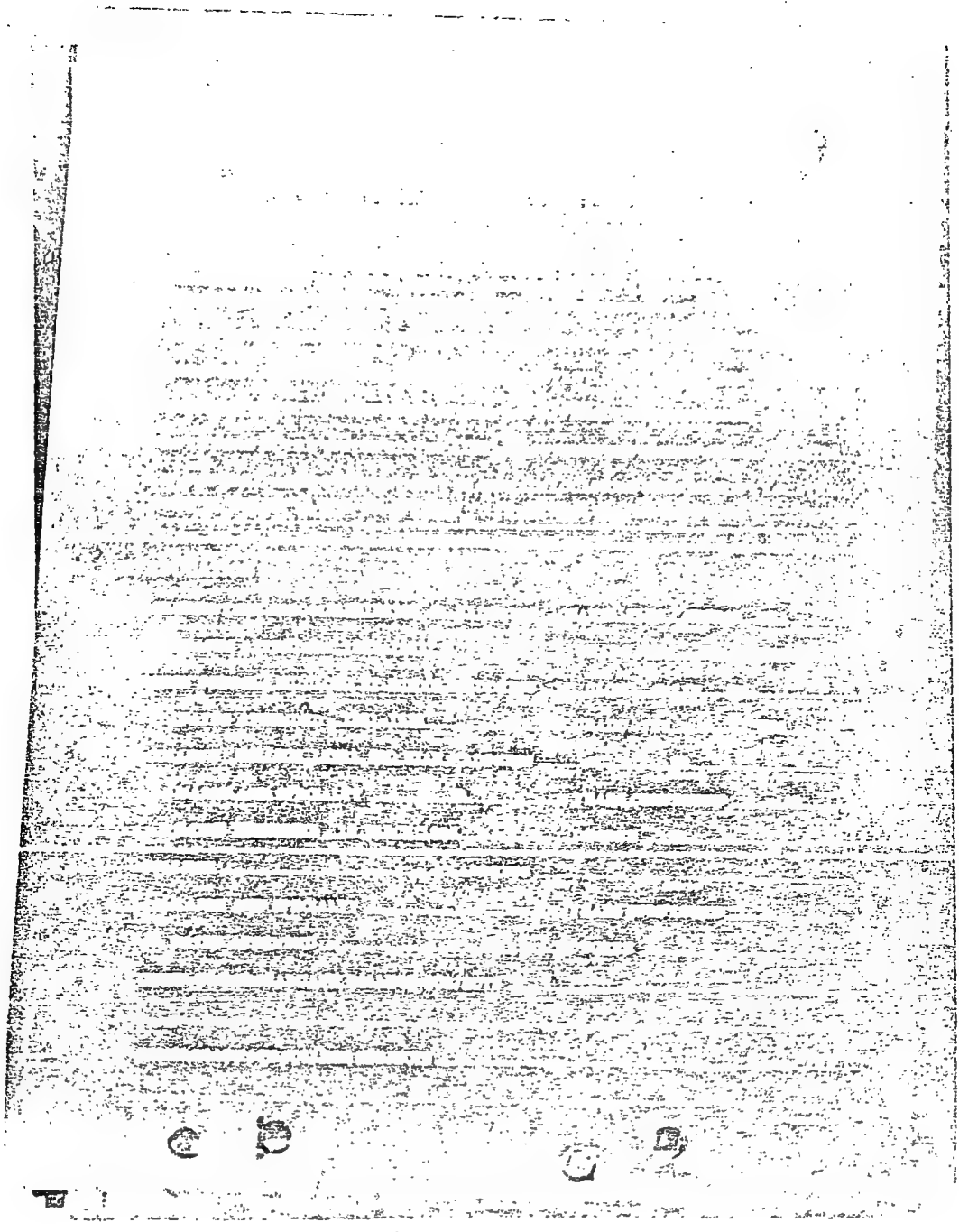


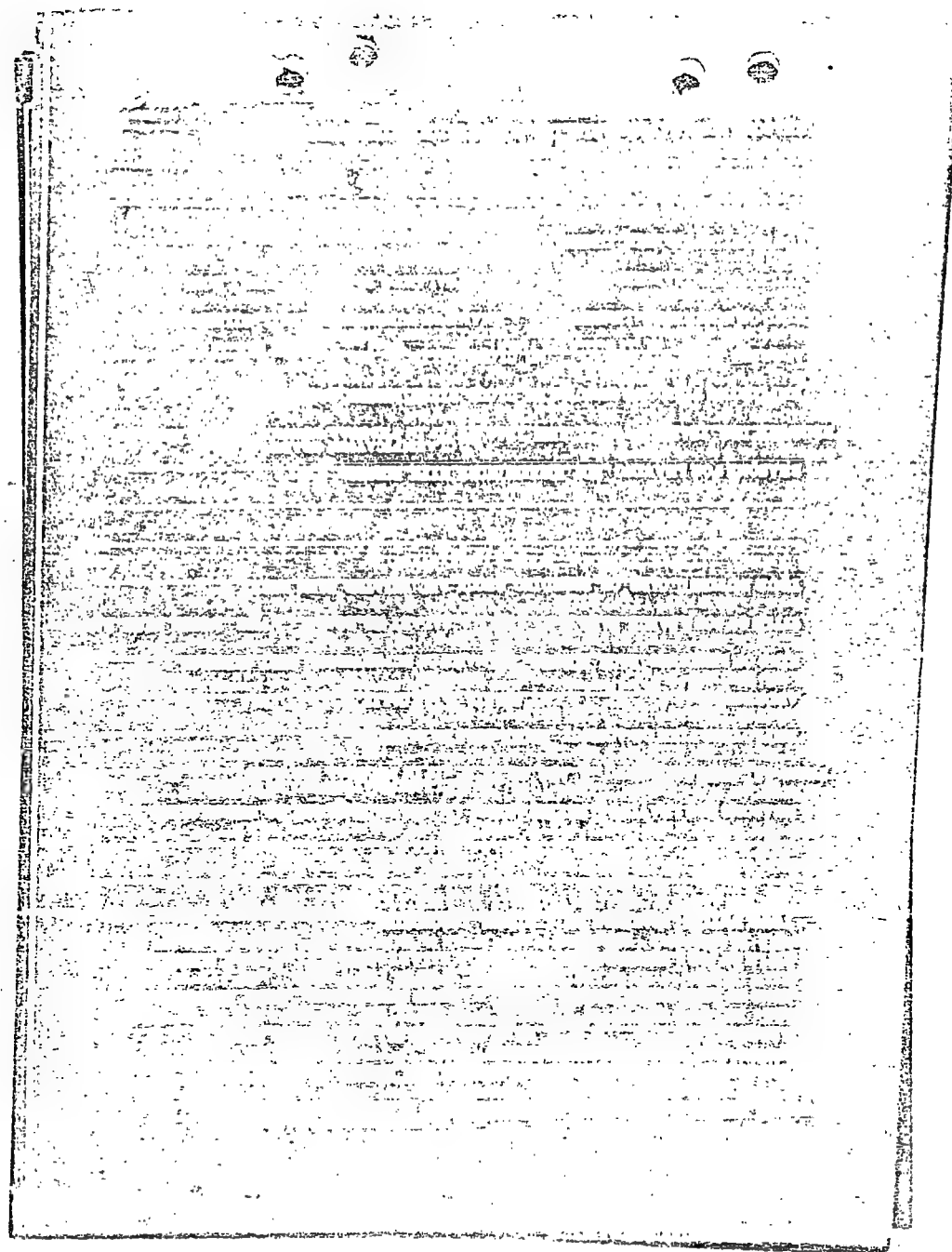


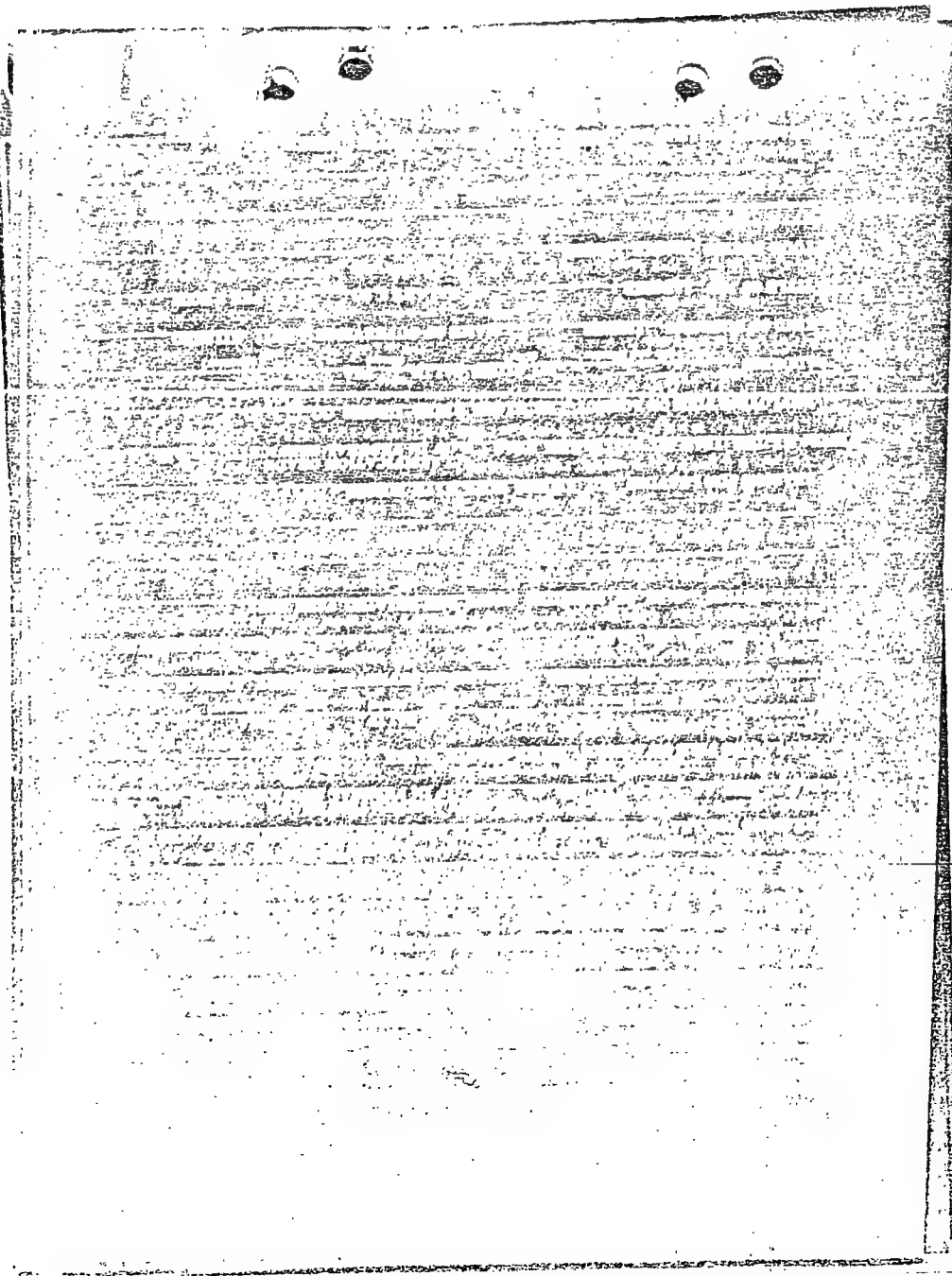


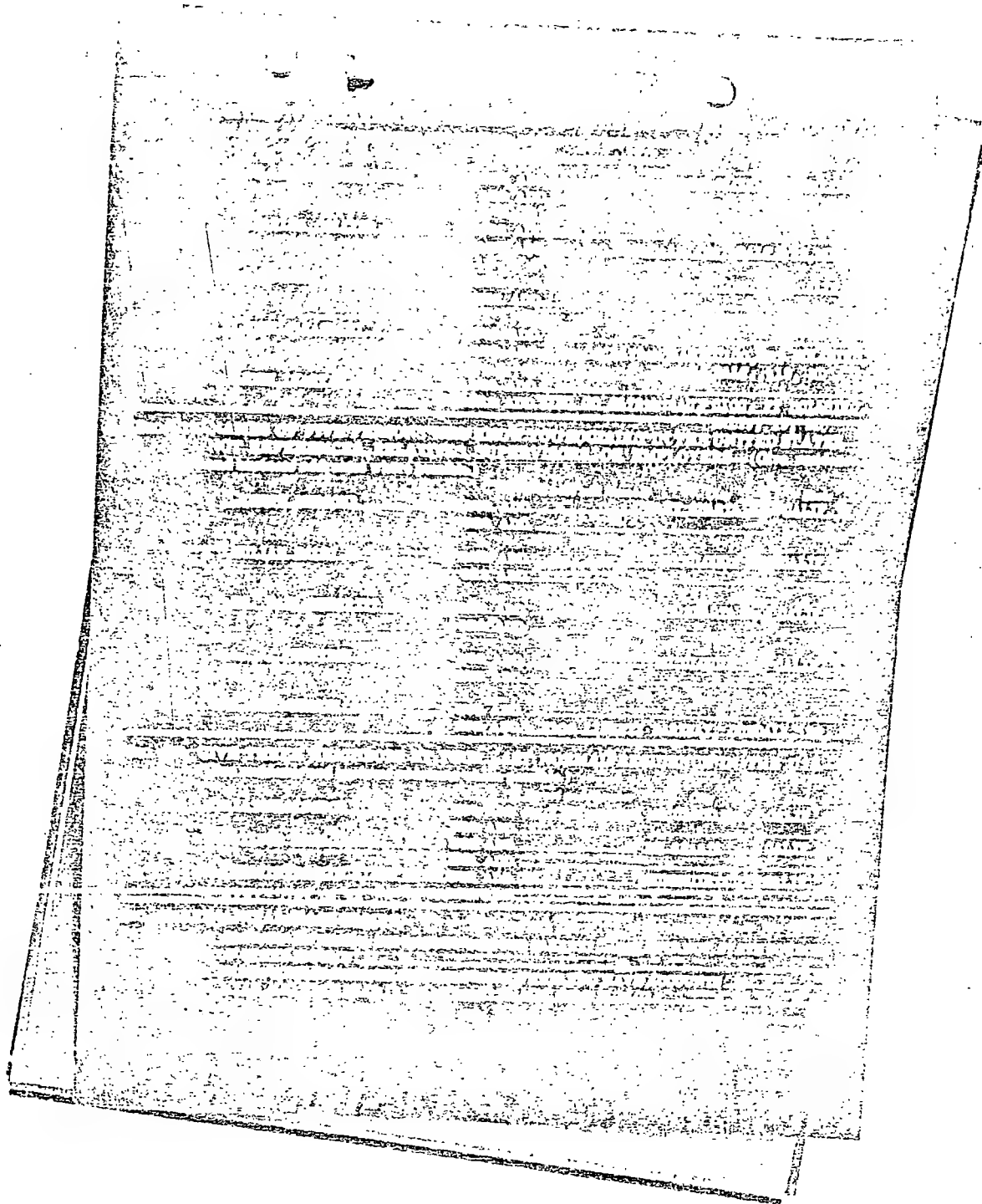


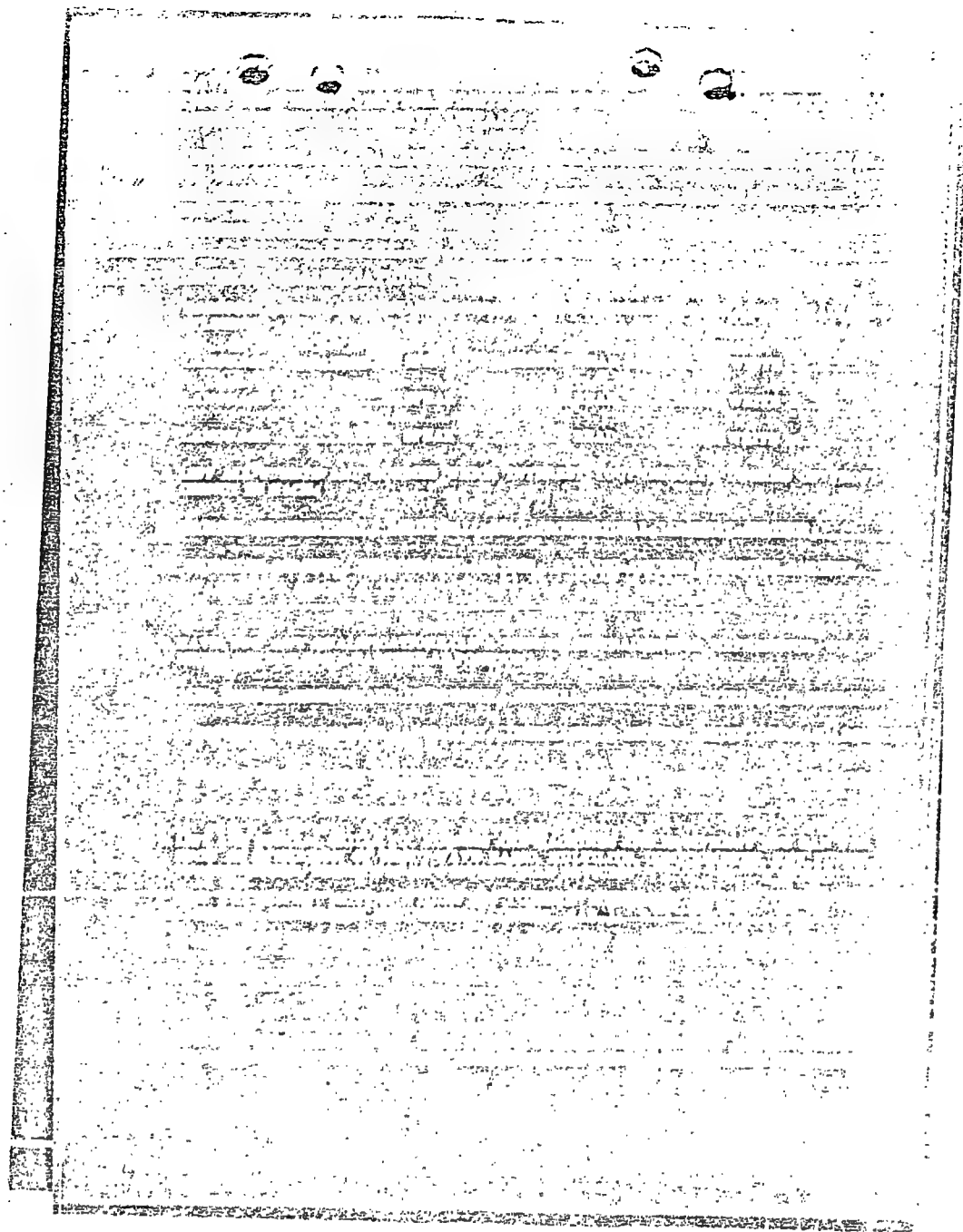


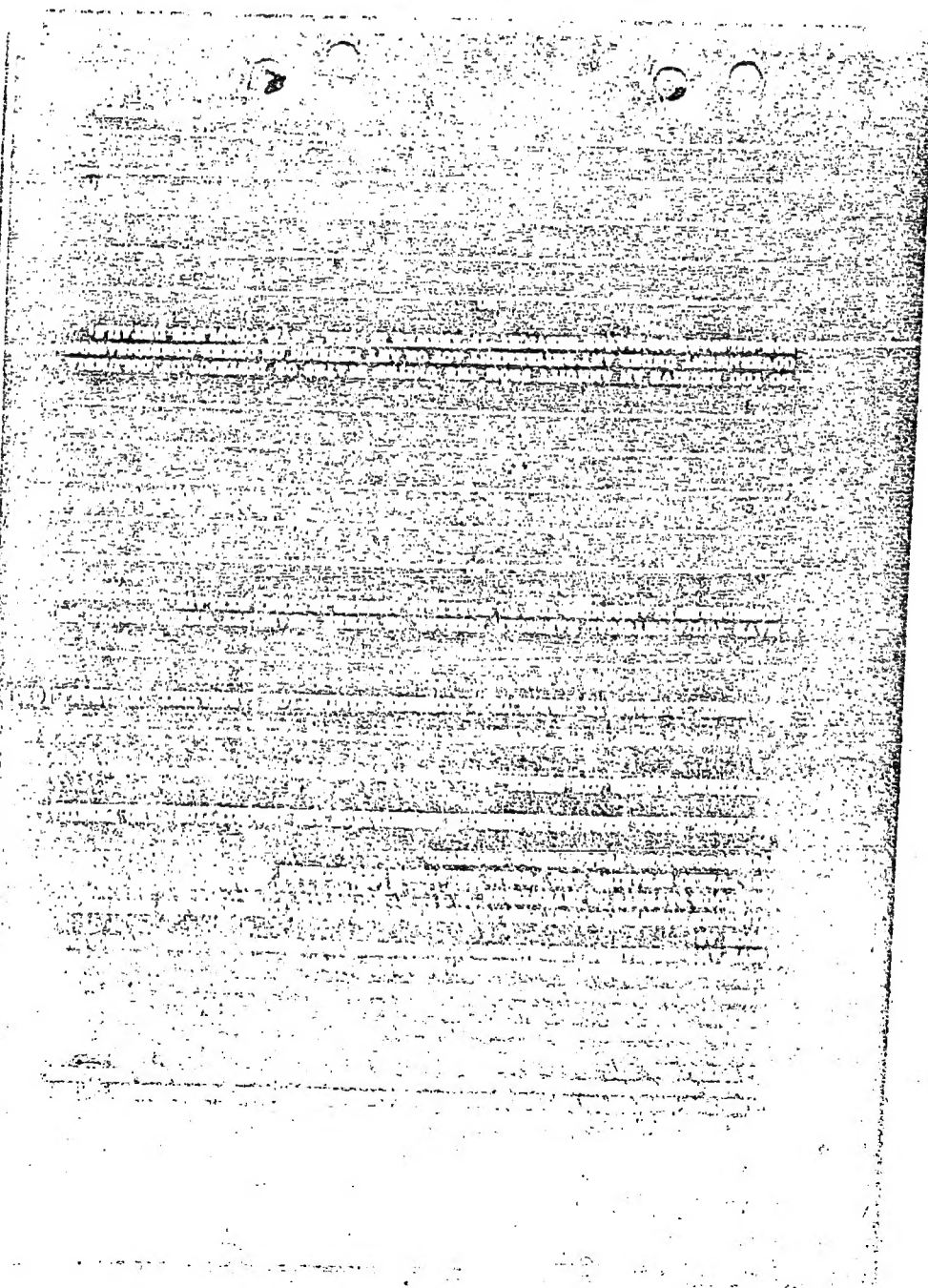


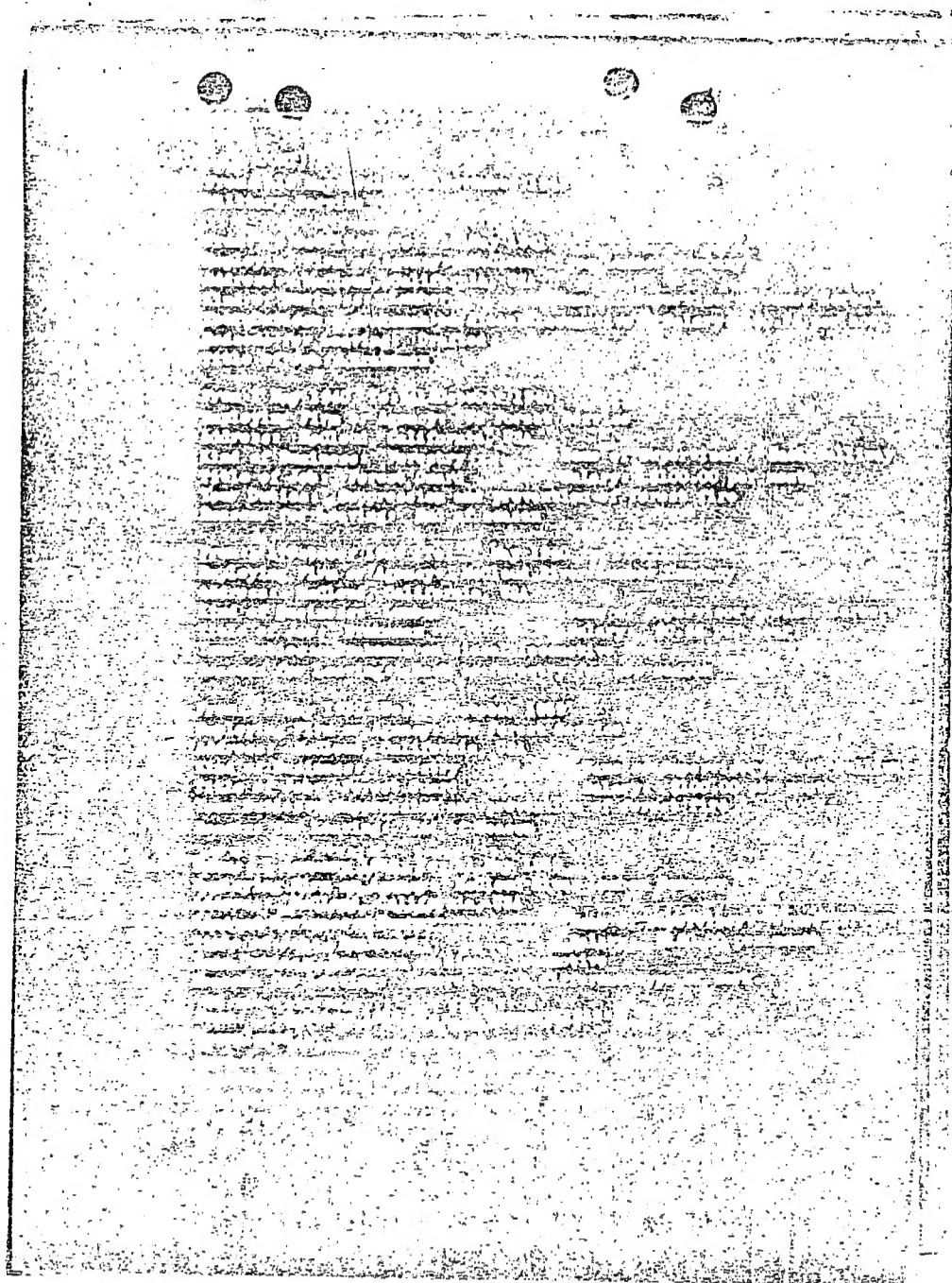


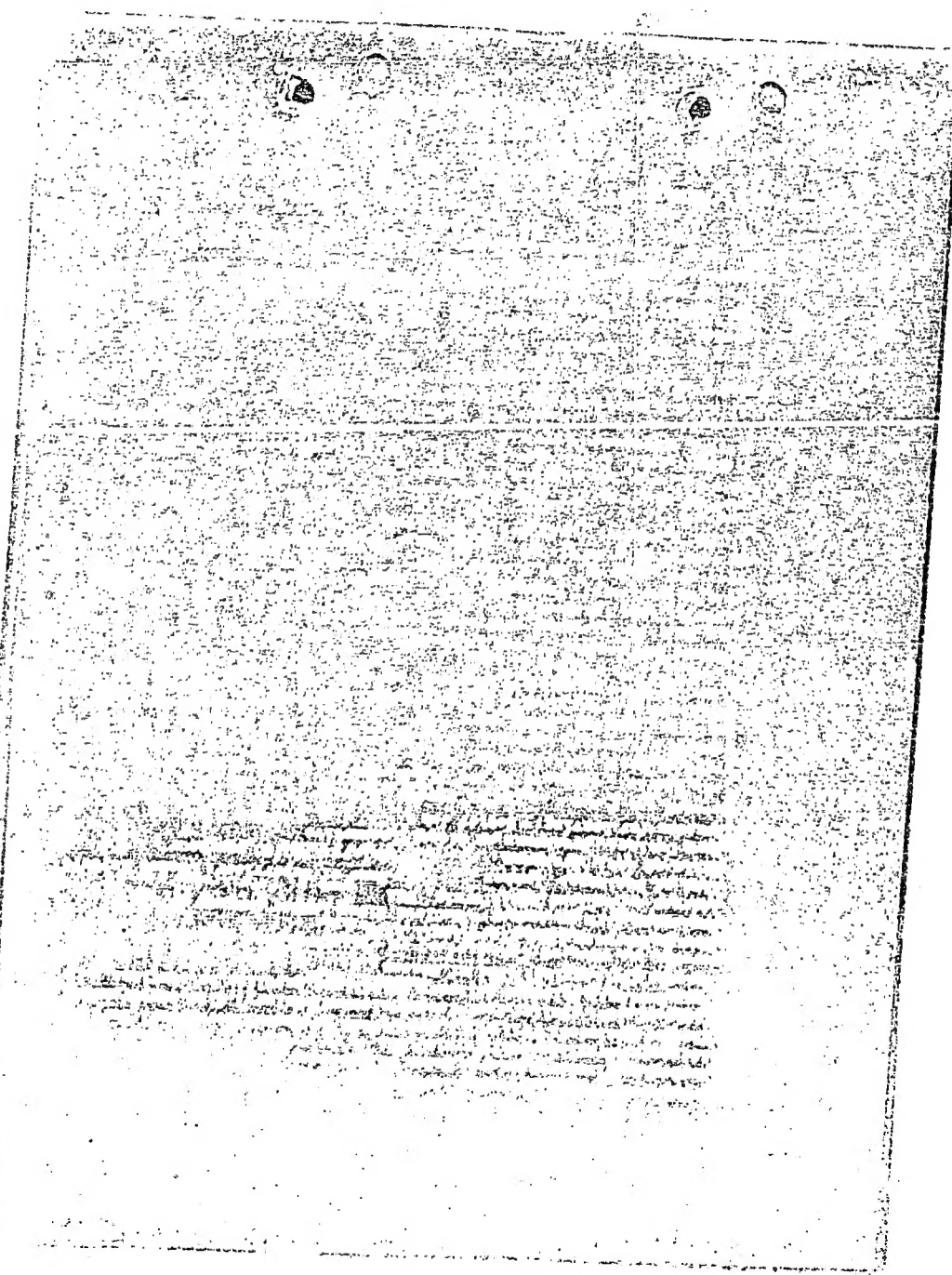












RECORD OF
PREVIOUS GOVERNMENT
SERVICE RETURNED TO
FEDERAL RECORDS CENTER IN
ST. LOUIS, MO.

DATE

~~Sept. 1962~~
Sept. 1963